

EXHIBIT 1

8/15/06

I met with Carole Newmark today to inform her of my decision to appoint Nicolle Sora the Social Worker for the palliative care service. Nicole will be traveling with the team to Ohio to visit a hospital that has a program in place. I told Carole that I felt that as a new social worker, young in her career it is important to give her something she can become expert in. I also told Carole that she has the responsibility for the mental health training and that will take up her time. I informed her that this decision was made with input from both RoseAnn and Maura. Carole was visibly angry and expressed disappointment in my decision.

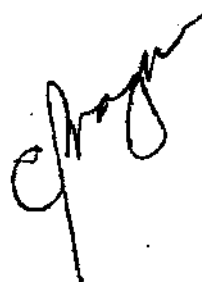


EXHIBIT 2

Orsaia, Patricia

From: Magone, Catherine
Sent: Monday, August 21, 2006 11:30 AM
To: Orsaia, Patricia
Subject: Accepted: Carole Newmark's concerns

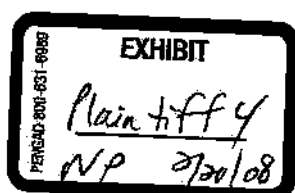


EXHIBIT 3

Orsaia, Patricia

From: Newmark, Carole
Sent: Tuesday, September 12, 2006 4:30 PM
To: Orsaia, Patricia
Subject: RE: can we meet this afternoon?

Hi Pat,

Sorry I did not get your email until just now, have been on the units and do not have access to my email on the units. Can we meet tomorrow at some time? Please let me know, I can always be reached on my hospital Nextel @ 224-8281. Thanks, Carole

Carole Newmark, LCSW

-----Original Message-----

From: Orsaia, Patricia
Sent: Tuesday, September 12, 2006 12:09 PM
To: Newmark, Carole
Subject: can we meet this afternoon?
Importance: High

Hi Carole,

I am sorry that we have not been able to connect due to several factors - my vacation, your vacation, your unplanned absence, etc. I can meet with you to discuss next steps today anytime from 3-4:30 in my office if you are available. Please let me know.

Thanks,
Pat

*Pat Orsaia, Director of Human Resources
Lawrence Hospital Center
Phone 914-787-3078
Fax 914-787-3069*

-----Original Message-----

From: Newmark, Carole
Sent: Tuesday, September 12, 2006 11:45 AM
To: Orsaia, Patricia
Subject:

Hi Pat,

This is a follow up to our meeting of approximately two weeks ago. Please let me know what the status is of the proposed meeting with Cathy Magone where we were going to discuss several issues including, and most importantly, the issue of possible ageism. This is troublesome and needs to be addressed in a timely manner. Thank you for your anticipated response.

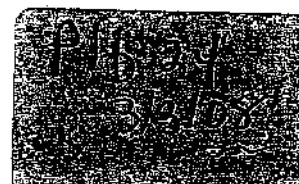


EXHIBIT 4

Orsaia, Patricia

From: Newmark, Carole
Sent: Wednesday, September 13, 2006 8:17 AM
To: Orsaia, Patricia
Subject: RE: can we meet this afternoon?

Hi Pat,

Today at 3:30 is fine, thank you.

Carole Newmark, LCSW

——Original Message——

From: Orsaia, Patricia
Sent: Tuesday, September 12, 2006 4:35 PM
To: Newmark, Carole
Subject: RE: can we meet this afternoon?

Hi Carol,

I can meet with you in my office tomorrow at 3:30 or Thursday morning. Let me know what works best for you.

Thanks,
Pat

*Pat Orsaia, Director of Human Resources
Lawrence Hospital Center
Phone 914-787-3078
Fax 914-787-3069*

——Original Message——

From: Newmark, Carole
Sent: Tuesday, September 12, 2006 4:30 PM
To: Orsaia, Patricia
Subject: RE: can we meet this afternoon?

Hi Pat,

Sorry I did not get your email until just now, have been on the units and do not have access to my email on the units. Can we meet tomorrow at some time? Please let me know, I can always be reached on my hospital Nextel @ 224-8201. Thanks, Carole

Carole Newmark, LCSW

EXHIBIT 5

Orsaia, Patricia

From: Newmark, Carole
Sent: Thursday, September 28, 2006 8:19 AM
To: Orsaia, Patricia
Subject: meeting

Hi Pat,

Can we set up a meeting with Cathy, you and me so that we can put some closure on the issues that we discussed? Thank you.

Carole Newmark, LCSW

N-279

10/6/2006

EXHIBIT 6

Orsaia, Patricia

From: Newmark, Carole
Sent: Friday, September 29, 2006 8:39 AM
To: Orsaia, Patricia
Subject: Meeting with Cathy Magone on 9/28/06



Hi Pat,

Thank you for taking the time to meet with Cathy Magone and me, I appreciate your assistance.

There are a few issues that were raised in the meeting that I would like clarified, as follows:

1. I would like to know how long my probation has been extended, this should not be held from me until I receive my performance evaluation.
2. When I asked Cathy what was the basis for my probation being extended, she stated that it was because of attendance. In our meeting yesterday, she alluded to the fact that there are work issues, but would not state what these are until she goes over my evaluation with me. This was a surprise to me, as she has never brought up any work issues until our meeting yesterday. I cannot remedy issues if they are not brought to my attention, and should not have to wait until my evaluation to hear what the work issues are.
3. When we went over the issue of ageism, Cathy denied that she said that "Nicole was younger and could handle the job better than I could." She stated that she did say that Nicole was "Young and could take things in like a sponge." This statement is tantamount to saying that I am old and are not able to absorb information as well. Cathy does not know what my capabilities are, she has not taken the time to learn about who I am and know exactly my strengths are.

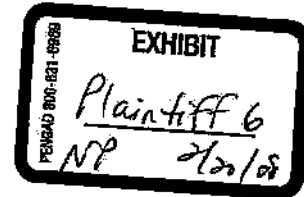
I know that we have discussed that incoming information is filtered differently by each person, however, I still contend that Cathy is holding my age against me. I know that she hired me knowing that I am older, however, her comments and actions during the past few months in regard to me have been dismissive and non-supportive. I cannot pinpoint when things changed between Cathy and I, but there has been a palpable change in her interactions with me, and this makes me feel very vulnerable and insecure about my job at LHC. I can go into detail at another time, if you wish.

Carole Newmark, LCSW

EXHIBIT 7

Orsaia, Patricia

From: Magone, Catherine
Sent: Wednesday, October 04, 2006 9:27 AM
To: Newmark, Carole
Cc: Orsaia, Patricia
Subject: clarification



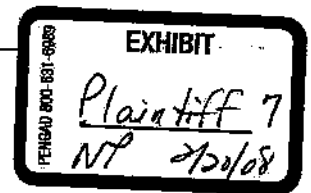
Carole, I am writing in response to an email that you sent to Pat Orsaia where you continue to express concerns regarding my use of the word "young" in describing Nicole Serra. I would like to reiterate that my decision to appoint Nicole to be the Social Worker for the palliative service was based on input from R O'Hare and Maura Delbene as well as the needs of the department. In describing Nicole as a new, young social worker needing to have a project of her own, I never intended to imply that you were not chosen because of your age or that anyone's age was relevant to my decision.

I trust that this finally clarifies the comment in question and my use of the word "young" in the full context of my comment.

EXHIBIT 8

Orsaia, Patricia

From: Magone, Catherine
Sent: Thursday, October 05, 2006 10:50 AM
To: Orsaia, Patricia
Subject: Carle Newmark



Pat, Just wanted you to know that Carole picked up her email at 5:30 last night and has not responded or spoken to me about it.

N-283

12/12/2006

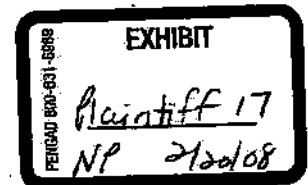
EXHIBIT 9

Lawrence Hospital
Center

Memo

To: File
From: Cathy Magone, Dir., Quality/Risk and Case Management
CC: P. Orsola
Date: October 5, 2008
Re: Carole Newmark

Chapman



Carole Newmark Points discussed at Termination Meeting on 10/05/06

Reviewed Performance Evaluation

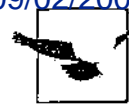
Carole has not adjusted to Lawrence's Case Management Model. My concerns were conveyed to her on 7/20/06 regarding need to be more proactive in discharge planning and meeting with families and collaborating with the multidisciplinary team. The need to be more focused and prioritize her work load was also stressed.

Carole has not made any progress in developing a Disaster Mental Health Training Program. This assignment was given to her 4 months ago. In addition, she has not kept me informed of an email sent on 9/28 regarding this program and the expectations.

Carole's reaction to a business decision to assign another team member to our palliative program was unacceptable.

Carole has had four unscheduled time off episodes during her probationary period.

EXHIBIT 10



First Advantage™

Fax Order Form & Applicant Release

In connection with your application for employment, understand that consumer reports or investigative consumer reports which may contain public record information may be requested or made on you including consumer credit, criminal records, driving record, education, current and prior employer verification, workers compensation claims and others. These reports will include experience along with reasons for termination of past employment. Further, understand that information from various Federal, State, local and other agencies which contain your past activities will be requested.

By signing below, you hereby authorize without reservation, any party or agency contacted by this employer to furnish the above mentioned information. You further authorize ongoing procurement of the above mentioned reports at any time during your employment. You have the right to make a request of First Advantage, upon proper identification and the payment of any authorized fees, for the information in its files on you at the time of your request.

App Signed Nicole Serra Date 3/14/00

Name:

S	e	r	r	a						N	i	c	o	l	e					A			
LAST					FIRST										MIDDLE								

Position:

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Maiden Name or A/K/A

S	e	r	r	a																			
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Soc Sec #:

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 Sex: ☒ Male Race: ☒ DOB:

0	3	/	0	6	/	1	9	7	6
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Driver's Lic #:

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 Issuing State:

N	Y
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Addresses: Past five (5) years

Current Address: 95 Bookman Ave
City: Sleepy Hollow State: NY Zip: 10891
County: Westchester
Dates Resided: From: 2000 To: current

Previous Address: 32 Cottage Hill St
City: New Rochelle State: NY Zip:
County: Westchester
Dates Resided: From: 1999 To: 2000

Previous Address: 2609 Farsund Dr
City: Yorktown Hgts State: NY Zip: 10891
County: Westchester
Dates Resided: From: 1970 To: 1999

For California applicants only, if you would like to receive a copy of your credit report, if one is obtained, please check this box. ☐ For Minnesota or Oklahoma applicants only, if you would like to receive a copy of the consumer report, if one is obtained, please check this box. ☐

EXHIBIT 11

View Employee Personnel

Personnel		Skills & Dependents		Cust-Def Personnel		Cust-Def-Restrict	
Social Security #		Name		Empl #			
[REDACTED]		NEWMARK, CAROLE		20636			
Address		Country (not US)		Name		User	
89 HILLTOP ACRES							
City		ST Zip Code		EEOC			
YONKERS		NY 10704		WHITE			
Home Phone		E-Mail Addr					
Emer Phone							
Birthdate		Type		Hire Date			
09/16/1945		FT		03/20/06			
Sex		Date		Adj Hire Date			
F		03/20/06		03/20/06			
Marital Status		Status		Seniority Date			
S		ACTIVE		03/20/06			
Date		Date		Next Eval			
		03/20/06					
Exempt		Reason		Review Date			
Y		SA-NEW					
Health Ins		Medicare Date		Reason			
Disability							

EXHIBIT 12

Lawrence Hospital Center
Bronxville, NY

Criteria Based Job Description and Performance Evaluation

(Check One)

- ☒ Probationary Period
☐ Annual
☐ Special review for purpose of:

Name: Nicole Serra
 Department: Quality and Case Management
 Evaluation Period: (Month / Year) 10/06

Date of Hire: 4-17-06
 Supervisor – Catherine Magone

I. Job Title/ Job Summary: Senior Social Worker

Provides supervision to Social Work staff. Provides care coordination services across the continuum including identification of patients at risk or in need of services, assessments, education and plan development. Implements and coordinates services needed at discharge. Provides counseling and clinical interventions toward helping patients achieve their optimal level of health.

II. Evaluations:

Evaluations must be completed by the supervisor/manager and discussed with the employee at the completion of the training period as well as annually thereafter. The employee is encouraged to comment on his/her evaluation and participate in the development of a work improvement plan. Employees should be given a copy of their evaluation.

III. Position Accountability / Performance Criteria:

Performance is evaluated in terms of the level of achievement by the individual for each measure. The following scale is used:

Exceeds Expectations: (EE)	Performance is continually and consistently above job requirements.
Meets Expectations: (ME)	Performance is aligned with the job requirements.
Needs Improvement: (NI)	Performance is below the job requirements.

Core Value: Respect – Treating patients we serve and those with whom we work with compassion, demonstrating a high regard for the dignity and worth of each person.

Consider the following behaviors when evaluating the core value of Respect:

Promotes a professional atmosphere through courteous communication.

Responds to customer concerns as soon as possible with compassion and understanding.

Observes and respects the privacy and confidentiality of medical and non-medical information.

Contributes towards maintaining a safe, comfortable environment for patients, visitors and staff.

Exhibits good interpersonal skills, including a positive approach with people and tasks.

Comments: Nicole demonstrates respect and compassion in all her interactions with patients and colleagues.

Core Value: Respect - Rating (EE, ME, or NI) →

ME

Core Value: Quality – Continuous improvement through innovation and a commitment to recognized standards of excellence.

Consider the following behaviors when evaluating the core value of Quality:

Efficiently uses work time for maximum productivity, meets deadlines and when assigned work is completed, anticipates and prepares for future assignments.

Maintains/develops professional competence through required in-service and educational programs. Demonstrates ability to work independently in the absence of supervision.

Attends /participates in unit/departmental staff meetings and reviews/signs minutes of all meetings not attended (as required).

Demonstrates interest in maintaining awareness in new developments in area of specialty. Participates in departmental performance improvement. Demonstrates follow through on assignments and instructions. Maintains a safe, uncluttered environment and follows all safe work practices.

COMMENTS:

Nicole works independently and has survived the last few months being the only Social Worker with grace and professionalism. +

Core Value: Quality - Rating (EE, ME, or NI) →

EE

Core Value: Integrity – Honesty and straight forwardness in all relationships.

Consider the following behaviors when evaluating the core value of Integrity:

Demonstrates support of the organization's mission, vision and core values.

Complies with all policies and procedures.

Completes all tasks thoroughly and honestly.

Refrains from negative comments about others and the organization.

Resolves any personal or management issues with appropriate parties and does not involve others.

Reports for duty punctually and uses break time and time away from work appropriately.

COMMENTS: Nicole maintains a positive attitude and demonstrates behaviors that are consistent with our Core Values.

Core Value: Integrity - Rating (EE, ME, or NI) →

ME

Core Value: Teamwork – Enthusiastic cooperation focused on accountability, mutual support and common goals.

Consider the following behaviors when evaluating the core value of Teamwork:

Approaches relationships to foster a productive and supportive environment.

Demonstrates ability to work well with coworkers and exhibits enthusiastic cooperation.

Uses expertise to support others.

Accepts personal responsibility and feedback.

Accepts assignments and suggestions willingly and embraces change.

COMMENTS: Nicole is a team player and is always willing to share resources and her expertise.

Core Value: Teamwork - Rating (EE, ME, or NI) →

ME

SERVICE EXCELLENCE STANDARDS: Courtesy and First Impressions, Telephone Etiquette, Sensitivity and Comfort, Professionalism and Teamwork, Service Recovery.

Consider the following behaviors when evaluating the Service Excellence Standards:

Anticipate customer needs and assist before asked, smile and make eye contact, be pleasant in all interactions, respond to requests promptly and efficiently, avoid loud laughter and noise, no use of profanity, escort to destinations, inform customers about delays in service, provide a comfortable atmosphere.

Practice telephone courtesy, ask permission before using speakerphone, identify yourself to caller by providing name and department, use Good Morning – Good Afternoon – Good Evening, ask and wait for reply before placing caller on hold, use hold button, take complete messages and repeat information to verify, provide name and number before transferring a call, apologize if you reach a wrong number, record an appropriate voice mail greeting including name, department and availability details.

Handle each situation with care, respond in a way that ensures respect, knock or announce yourself before entering patient areas, pull curtains and close doors for privacy, provide a proper sized gown/robe and covering during transport, give patients the option of having visitors leave the room while providing care, always speak English while performing duties.

Follow HIPAA guidelines regarding patient confidentiality, communicate with customers in private areas, observe personal appearance departmental uniform policies, stay informed about our services, resources, policies and procedures, do not make negative comments or discuss work-related concerns in public, take every opportunity to speak positively about the LHC family, communicate with other departments with respect, cooperation and consideration of each other's priorities.

Be available to hear and respond to customer's concerns, offer an apology for the lapse in service, assure customers that you understand and care, help solve the problem with information and guidance, assure a timely response and then follow-up, use the LHC Service Recovery Program, and refer appropriate concerns to leadership and the Patient Advocate.

Follows department specific Service Excellence Standards.

Comments:

Comments

ME

Essential Functions:	E.E	M.E	N.I
Interviews patients/significant others to obtain data on personal, social, medical and emotional history in order to delineate problems requiring Social Work intervention and to plan appropriate services.		X	
Coordinates with the Case Manager and Multidisciplinary Team members regard discharge planning for needed care in the home or in an alternate setting.		X	
Evaluates patient and family data, selects appropriate Social Work methods and implements treatment program in conjunction with the Case Manager and Multidisciplinary Team.		X	
Provides support, counseling and/or crisis intervention to patients/families experiencing and/or anticipating issues in adjusting to illness, catastrophic diagnoses, changes in living situations and bereavement.		X	
Actively participates and provides pertinent information at length of stay meetings and multidisciplinary discharge planning rounds.		X	
Provides advanced directive education.		X	
Reviews financial resources for long term placement and provides education to patient/family.		X	
Coordinates the hospital's program for management of cases of suspected child/ adult abuse/ maltreatment, assuring compliance with regulatory requirements and applicable law.		X	
Assists patients and families in accessing appropriate entitlements.		X	
Initiates family and provider team meetings to clarify and plan strategies related to psychosocial and economic issues particularly those related to care progression and transition. May act as the liaison between patient/families and all providers of care within and external to the organization on social issues.		X	
Conducts support groups for targeted populations		NA	
Provides coverage to designated units/services and the ED in the absence of the assigned Social Worker.		X	
Participates and assists in departmental studies and projects and hospital committees as assigned.		X	

Age Specific Performance Evaluation: Indicate your evaluation by inserting the appropriate letter in each column. Method: T=Written/Post Test; V=Verbal Test; P=Peer Review; D=Documentation; SLM=Self Learning Module; S=Skills Observation C=Competent NI=Needs Improvement NA=Not Applicable to employee						
	Method	Neonatal	Pediatric	Adol es	Adul t	Ger iat
See age specific list.				C	C	C

Competency Evaluation: The employee will demonstrate the ability to perform the following department specific items that are high risk, low volume and/or problem prone. Method: T=Written/Post Test; V=Verbal Test; P=Peer Review; D=Documentation; SLM=Self Learning Module; S=Skills Observation C=Competent NI=Needs Improvement NA=Not Applicable				
Skills / Equipment:	Method	C	IN	NA
Knowledge about indicators of abuse and how to interface with appropriate agencies.	S, D	X		
Accurately fills out the screen.	S, D	X		
Knowledge of Meditech	S	X		
Summary / Supervisor Comments:		E.E.	M.E.	N.I.
	Overall Performance:		X	

Employee Improvement Plan/Goals and Needs Assessment:

Ms. Serra has successfully completed her probationary period. She is a conscientious, dedicated professional who works hard to achieve good outcomes for her patients. She brings a strong psych background to the department and her clinical skills are a valuable asset. As the dedicated palliative care Social Worker, she is developing the skills necessary to deal with a vulnerable population. She is always willing to learn and maintains a positive attitude even in stressful situations. Nicole, thank you for all your hard work. I am happy to have you on my team!

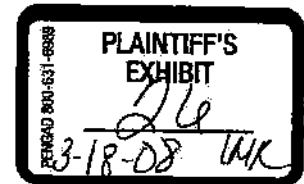
(Improvement items should be addressed)

Employee Comments:

Employee Signature: Nicole Serra, LCSW Date: 1/17/07

Evaluator Signature: Catherine Prager Date: 1/14/07

EXHIBIT 13



-----Original Message-----

From: Serra, Nicole
Sent: Thursday, July 20, 2006 1:38 PM
To: Delbene, Maura
Subject: RE: Mental Health Service Locator

Maura. Thanks for you e-mail.. I'm glad that you are part of the team also... it is often hard to work in this environment when you don't know who you can trust... I consider you a person who is supportive and also personally and professionally.. hope that you have a good day!!! Let me know what I need to do for you on the cases you wne to see from this morning's rounds!!! Thanks.. Nicole

-----Original Message-----

From: Delbene, Maura
Sent: Wednesday, July 19, 2006 1:30 PM
To: Serra, Nicole
Subject: RE: Mental Health Service Locator

Nicole

Thank you for your response, it is often so busy that our time as professionals to meet, exchange information and grow in our fields is not often a priority.

I love to mine for resources and then share them (it makes our work easier) and hope that if I send too much your way you will tell me --

You have good energy and enthusiasm in your work here --don't let one slip up cloud the picture of your real spirit. We all need to help and support each other and I am glad to be part of the team.

Maura

-----Original Message-----

From: Serra, Nicole
Sent: Wednesday, July 19, 2006 11:55 AM
To: Delbene, Maura
Subject: RE: Mental Health Service Locator

Hi Maura.. I just wanted to say thank you so much for sharing this important info with Carole and I. It always feels like finding a gold mine when one finds out good resources for continued learning and assistance!! Once again, thanks for understanding my bad attitude last week.. I appreciate your mindset. Anyway, hope to see you on Monday.. I may have a case for you to view for your medical opinion.. I will update you when I know more.. Thanks again for thinking of us!! Have a great day, Nicole

-----Original Message-----

From: Delbene, Maura
Sent: Monday, July 17, 2006 12:29 PM
To: Newmark, Carole; Serra, Nicole

1/25/2007

N-136

Cc: O'Hare, RoseAnn; 'Dr. Page'
Subject: Mental Health Service Locator

Carole and Nicole –

Hope you are both well.

Came across an informative web site (by state) regarding resources for mental health services that I thought you might find helpful.

<http://www.mentalhealth.samhsa.gov/databases/>

I was impressed with the extensiveness of the database.

Maura

Maura L. Del Bene, MS, RN, NP-P
Palliative Care Service
Lawrence Hospital Center
55 Palmer Avenue
Bronxville, NY 10708

Voice 914-787-4190
Fax 914-787-5056

Palliative Care is interdisciplinary care that aims to relieve suffering and improve quality of life for patients with serious or life threatening illness

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Any views expressed in this message are those of the individual sender, except where the message states otherwise and the sender is authorized to state them to be the views of any such entity.

EXHIBIT 14

Carole Newmark

From: Denise Galloway [DGalloway37@nc.rr.com]
Sent: Monday, October 23, 2006 6:58 PM
To: 'Carole Newmark'
Subject: RE:

Hi. I was in Washington for a few days so I am just home now. I always think it is so unfair when troubles come in multiples, and then I remember that my mother taught me the world wasn't fair. I am sorry for all you have dealt with these past few weeks! It isn't easy. I think death strikes our hearts, while injustice strikes right to the core of outrage and feelings of impotence (as least for me!). Let's see now. I went to Pat Orsaia at least twice. I'm sure Elizabeth went more than once over the years. She usually went to Deb. In fact, I believe Elizabeth went to Ed Dinan and told him what she thought of Cathy and Dr. Roeder before she left, and specifically how poorly she felt they had treated me. I believe the case managers have been together, and for all I know also on their own; and I know Diane Lantz went at least once. I also think other departments have complained about her treatment of them, and doctors have been to Ed. Does that give you a perspective?

I am confused. I did not find Pat Orsaia unsympathetic to me. In your previous e-mail you sounded as though you didn't like her. I don't mean to intrude, but what happened? We don't have to e-mail unless you prefer it. I have Time Warner so I don't pay for long distance calls. If you'd rather chat, let me know a good time to call. What's important here is that you do not let yourself be too demoralized by this experience. The theory of "if she picks you she will support you" sure was flawed. I can't believe no one has reported her to the Dept of Health, NYS and JACHO for having no social work on site. I'm sure that is a no/no. I hope the info helps you. Let me hear from you when you are up to it!

From: Carole Newmark [mailto:newmarkc1@optonline.net]
Sent: Sunday, October 22, 2006 7:58 PM
To: Denise Galloway
Subject:

Hi Denise,

Hope you are well and enjoying retirement.

Margie's mother died last Saturday, so things have become even more complicated, but we are getting through it all.

I have had some time to process and think about certain aspects of LHC environment. You stated that Cathy M was brought to HR before me, but you did not expand on this. Who took her to HR and for what? I'd like to know. Pat Orsaia also eluded to this, but did not give specifics.

Keep in touch and be well.

Carole

EXHIBIT 15

Carole Newmark

From: Andersen, Katherine [kandersen@stellarishealth.org]
Sent: Thursday, October 12, 2006 7:08 AM
To: Carole Newmark
Subject: RE: HI

So glad to hear from you and that the turkeys did not get you down. It is a tough place here sometimes and not everyone gives what they would like to receive, I am sorry for that. I know whatever you do someone will be lucky to have you and your expertise, please contact me every so often and good luck I will await your new found success story in the near future.
Love Kathy

-----Original Message-----

From: Carole Newmark [mailto:newmarkc1@optonline.net]
Sent: Wednesday, October 11, 2006 9:33 AM
To: Andersen, Katherine
Subject: RE: HI

Hi Cathy,

I was really good to hear from you, I appreciate your email more than you can imagine. LHC is not the same as it was years ago, that's for sure. I have to find my place, and that is in mental health. I am looking into starting up a private practice, since my forte is psychotherapy. I thought I could fit in at LHC, but there is such a back biting mentality and pathology in case management dept. so I didn't stand a chance. I did leave LHC with my head held high, and will continue to see the experience as one that will catapult me into what I really should be doing. I have always loved working in Oncology, and perhaps I will continue to do social work in this arena plus do private practice.

Again, thank you for contacting me. My being let go was so sudden and demeaning that I didn't get a chance to say goodbye to many of the "good guys." Be well, and thanks for being such a good support.

Carole

-----Original Message-----

From: Andersen, Katherine [mailto:kandersen@stellarishealth.org]
Sent: Wednesday, October 11, 2006 8:09 AM
To: newmarkc1@optonline.net
Subject: HI

Carol I was off for the Fri and Monday and got back yesterday and heard, I am devastated and so sorry, I don't even know what happened, Denise told me. You were getting on board so nicely and we were all getting to know you so well, please keep in touch, again, I am so sorry you are not here.
Kathy

Kathy Andersen RN, MPA, OCN
Clinical Educator Oncology, IV Team, HomeCare
Lawrence Hospital Center
914 787-5047
kandersen@lawrencehealth.org

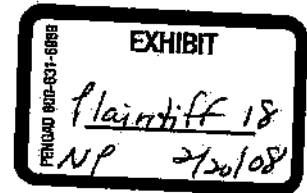
Note:

This message is for the named person's use only. It may contain confidential, proprietary

EXHIBIT 16

Newmark, Carole

From: Newmark, Carole
Sent: Tuesday, May 23, 2006 10:33 AM
To: Magone, Catherine
Subject: Job description



Cathy,

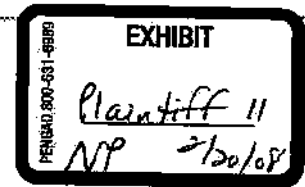
I know that we have both been out recently, and I was wondering what the status is from our job description meeting. There are still some questions about roles, etc. that the CMs bring up. Please advise.

Carole Newmark, LCSW

EXHIBIT 17

Newmark, Carole

From: Magone, Catherine
Sent: Thursday, May 11, 2006 8:24 PM
To: Newmark, Carole
Subject: Stuff



I just wanted you to know that I really think you are going to be amazing. You are just going to have to be patient with yourself and accept that there are some things that you just don't know! Wisdom comes from knowing when to ask the right questions and getting the right answers. Unfortunately, I don't have all the right answers but I will always try and help you to find the resources that you need. Six months from now, we will be laughing- I promise. I look forward to spending this time learning with you and Nicole. Thank you, Cathy.

EXHIBIT 18

NOMINATION FOR BIG HEART AWARD

INCLUST ROOM

Staff Member's Name: Carole Newmark

Work Area: 3 North Date: 4/17/06

Social Worker

Did a member of our staff do something special for you?

Please fill out this card and tell us how someone created a memorable moment for you at Lawrence Hospital Center.



We went to thank Carol for
doing a very good job of preparing
my husband's file to leave the hospital
by working hard and she got it
done very well. Putting him to the VA
home was not an easy plan. Lots of
paper work.

Signature: _____

Carole Newmark

☒ Patient ☐ Staff

Send to: Administrative Offices via interoffice mail or place in "ballot box" located in several areas of the Hospital.

EXHIBIT 19

Magone, Catherine

From: Enright, Catherine
Sent: Thursday, October 05, 2006 11:44 AM
To: Magone, Catherine
Subject: FW: Disaster Mental Health Training Update

*Catherine Enright MSN, RN, CNA
Director Patient Care Services*

-----Original Message-----

From: Herrmann, Jack [mailto:Jack_Herrmann@URMC.Rochester.edu]
Sent: Thursday, September 28, 2006 5:14 PM
To: Shaughness, Karen; rarmstrong@cayugamed.org; icl1993@aol.com; igavzy@aol.com; Ogrodnick, Joie
Subject: FW: Disaster Mental Health Training Update

Sorry Folks:
I put in an incorrect email for you which is why you didn't get this email I sent out earlier. Jack

Dear Disaster Mental Health Instructors:

I hope you are all doing well and enjoyed your summer. I'm writing to give you an update on the disaster mental health training program as well as provide you with contact information for the other DMH instructors across the state. Please review the attached contact list by October 1 and let me know if your information is correct. I will be sending out a final copy (one alpha list and one by your region) once all the corrections have been made.

As you recall from the course, each facility that receives funding under the NYS DOH Hospital Bioterrorism Preparedness grant is required to provide training and education to hospital personnel on the mental health consequences of disasters and other public health emergencies. Over the last year, you were trained as an instructor in the *Disaster Mental Health: A Critical Response* curriculum. We explained that this course should be used to train mental health and spiritual care professionals in your facility so that they have the requisite skills and knowledge that allow them to respond to the disaster-related needs of victims, hospital employees, disaster responders, and the families of these individuals. **Your hospital has agreed, by sending you to the instructor training, to conduct at least one training for your facility over the next year (before August 30, 2007).** While technically only one training is required in this time period, some facilities will need to consider hosting additional trainings in order to prepare an adequate number of professionals based upon the size of your facility and the population you serve. Other facilities, which have limited mental health/spiritual care resources and are smaller in size, may need to join together with other area hospitals or the county mental health authority to train a combined team that can meet the needs of your community. There are many different ways to meet this goal, though some of them take a little bit more energy and creativity to initiate. If you are having difficulty recruiting enough participants to take the course (i.e., minimum 12-maximum 26), please let me know and I'm happy to brainstorm ways to help resolve this dilemma.

If you are not in the position of authorizing the course and have solely been assigned just as your facility's instructor, please contact your hospital disaster planner, bioterrorism coordinator, hospital

10/5/2006

N-503

administrator, or your direct supervisor and make them aware of this agreement. Chances are they already are aware of this or know who to direct you to. If you have any difficulty identifying the appropriate contact person at your facility, please contact the Regional Resource Center coordinator in your area. His/her email address can be found above in the 'cc' line.

Once you have identified the dates of your training, please contact me at the email address below with your dates. **Please remember, the course was designed as a 14 hour training curriculum and must be administered in its entirety in order to meet the DOH grant deliverable.** Whether you conduct it in 2 consecutive 8-hr days or over a period of multiple days or weeks is entirely up to your facility, but it cannot be conducted in less than 14 hours. Please be prepared to provide the following documents to me once your facility has completed the course: the *Sign-In Sheet*, the *Web Log*, and the participant **Pre-Training Questionnaire**. These documents can be sent to my attention at the address below. Also, please consider keeping copies of these documents for your own tracking purposes or in case they are lost in the mail.

Once we have received these documents we will contact your trainees and ask them to complete the on-line questionnaires we discussed during your training. Once the deadline for completion has passed, my assistant will compile the instructor evaluation data and send it to you. This will be your prompt to send out Certificates of Completion to your trainees. Please do not send these certificates out until you have received the evaluation data from us. All of the forms I have referred to above are located on the CD-ROM you received during your training and are also available on the secure instructor area of our website.

NYS DOH has also strongly encourages healthcare facilities (as outlined in the grant deliverables) to train other hospital personnel in the psychological consequences of disaster and supportive techniques that will be useful to them in their disaster response roles. These individuals are typically non-mental health professionals who may be providing direct patient care (physician, nurses, aides, technicians, security officers, etc.) or come in contact with patients and their families during disaster (cafeteria workers, housekeeping staff, etc.). The Disaster Mental Health: A Critical Response curriculum, while a helpful course to many, is more training than is needed for these individuals and should only be reserved for hospital personnel that will be providing direct disaster mental health intervention. In lieu of this course we have developed a 75 minute, on-line training entitled, *Psychological First Aid: Helping People Cope During Disasters and Public Health Emergencies*. This self-study course teaches individuals the importance of emotional and practical support in the immediate aftermath of disasters and how to provide such support. The training can be found on the University of Rochester Center for Disaster Medicine and Emergency Preparedness website at: http://www.centerfordisastermedicine.org/disaster_mental_health.html. We are also working currently on a skills-based companion training to this course for those individuals that will need more advanced skills in providing PFA.

I wish you good luck as you go on to schedule and conduct your training. Please know you can call me with any questions or concerns at any time.

Warmest Regards,
Jack

Jack Herrmann, MEd., NCC, LMHC
Assistant Professor of Psychiatry and of Clinical Nursing
Director, Program in Disaster Mental Health
University of Rochester Medical Center
300 Crittenden Blvd., Box Psych
Rochester, New York 14642

EXHIBIT 20

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

-----X
CAROLE NEWMARK,

Plaintiff,

07 Civ. 2861 (CLB)

-against-

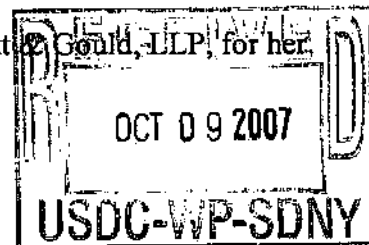
LAWRENCE HOSPITAL CENTER,
PAT ORSAIA, individually, and CATHY
MAGONE, individually,

**FIRST AMENDED
COMPLAINT**

Jury Trial Demanded

Defendants.
-----X

Plaintiff CAROLE NEWMARK, by her attorneys Lovett Z. Gould, LLP, for her
first amended complaint respectfully states:



NATURE OF THE ACTION

1. This is an action for compensatory and liquidated damages proximately resulting from Defendants' violation of Plaintiff's rights as guaranteed by the Age Discrimination in Employment Act, 29 U.S.C. §621 *et. seq.* and Section 296 *et seq.* of the Executive Law of the State of New York.

JURISDICTION

2. The Court's jurisdiction is invoked pursuant to 28 U.S.C. §§1331, 1343. In that connection on or about November 20, 2006, Plaintiff duly filed a Charge of Discrimination premised on age (#520-2007-00751) with the United States Equal Employment Opportunity Commission (hereinafter "EEOC"). On or about February 23,

2007, the EEOC issued to Plaintiff a Notice of Right to Sue. Plaintiff's state law claim is interposed in accordance with the Court's supplemental jurisdiction, 28 U.S.C. §1367.

THE PARTIES

3. Plaintiff CAROLE NEWMARK is a sixty-one year old citizen of the United States, a domiciliary of the State of New York and a resident of the Northern Counties. She has a Master of Social Work degree.

4. Defendant LAWRENCE HOSPITAL CENTER (hereinafter "Hospital") is a New York domestic corporation with premises for the conduct of business at 55 Palmer Avenue, Bronxville, New York.

5. Defendant CATHY MAGONE (hereinafter "Magone"), who is sued in her individual and personal capacities only, at all times relevant to this complaint was employed by the Hospital as its Director of Case Management. She was also responsible for Risk Management and Quality Assurance.

6. Defendant PAT ORSAIA (hereinafter "Orsaia"), who is sued in her individual and personal capacities only, at all times relevant to this complaint was employed by the Hospital as its Director of Human Resources. Orsaia and Magone were at all times referenced *infra* vested by the Hospital with final decision-making authority with respect to terminations of employment.

THE FACTS

7. In or about March of 2006 Plaintiff was hired by the Hospital, having been advised by Magone in words or substance that she would be considered for assignment as

a Senior Social Worker dedicated to the Hospital's new Palliative Care Unit (hereinafter "Unit").

8. Shortly after the commencement of Plaintiff's employment Nicole Serra (hereinafter "Serra") was hired by the Hospital as a Social Worker. Serra is a considerably younger, former co-worker of Plaintiff's from Phelps Memorial Hospital. Plaintiff thereafter trained Serra with respect to her job duties at the Hospital.

9. Following the completion of Serra's training and on or about August 18, 2006, Magone advised Plaintiff that Serra rather than Plaintiff was being appointed to the Unit "because she [Serra] is younger and can handle the job better than [Plaintiff] can".

10. Plaintiff shortly thereafter met initially with Orsaia at which time Plaintiff reported what Magone had said, as referenced in the preceding paragraph "9". Plaintiff then met with both Magone and Orsaia regarding Magone's age discriminatory comment.

11. Magone falsely denied having made the subject statement, and instead then advised that the reason for Serra's appointment to the Unit instead of Plaintiff was: "Nicole [Serra] is young and could take things in like a sponge".

12. Magone and Orsaia thereupon advised Plaintiff that she was not a "good fit" for the Hospital. Her employment was thus terminated by reason of her age and in retaliation for having lodged an age discrimination complaint effective October 5, 2006.

13. By reason of Defendants' conduct Plaintiff was caused to suffer: pecuniary losses; loss of fringe benefits; emotional upset; discrimination by reason of her age; retaliation; anxiety; public embarrassment; public humiliation; impairment of her professional reputation; impairment of her professional career; and she was otherwise rendered sick and sore.

**AS AND FOR A FIRST CLAIM
AGAINST THE HOSPITAL**

14. Repeats and realleges as if fully set forth the allegations of fact contained in paragraphs "1" to "13", inclusive.

15. Under the premises Defendant violated Plaintiff's rights as guaranteed by the Age Discrimination in Employment Act.

**AS AND FOR A SECOND CLAIM
AGAINST THE HOSPITAL**

16. Repeats and realleges as if fully set forth the allegations of fact contained in paragraphs "1" to "13", inclusive.

17. Under the premises the Defendants violated Plaintiff's right to be free from retaliation for having opposed discrimination in the workplace on the basis of age, which right is guaranteed her by reason of the Age Discrimination in Employment Act.

**AS AND FOR A THIRD CLAIM
AGAINST ALL DEFENDANTS**

18. Repeats and realleges as if fully set forth the allegations of fact contained in paragraphs "1" to "13", inclusive.

19. Under the premises Defendants violated Plaintiff's rights as guaranteed by reason of Section 296 *et. seq* of the New York State Executive Law.

**AS AND FOR A THIRD CLAIM
AGAINST ALL DEFENDANTS**

20. Repeats and realleges as if fully set forth the allegations of fact contained in paragraphs "1" to "13/", inclusive.

21. Under the premises the Defendants violated Plaintiff's right to be free from retaliation for having opposed discrimination in the workplace on the basis of age, which right is guaranteed her by reason of Section 296 et seq. of the Executive Law of the State of New York.

WHEREFORE a judgment is respectfully demanded:

- a. On the First Claim awarding such compensatory damages as the jury may determine, awarding liquidated damages, reasonable attorney's fees and costs,
- b. On the Second Claim awarding such compensatory damages as the jury may determine, and,
- c. Granting such other and further relief as to the Court seems just and proper.

Dated: White Plains, N.Y.
October 8, 2007

LOVETT & GOULD, LLP
By: *Drita Nica*
Drita Nica (DM 0966)
Attorneys for Plaintiff
222 Bloomingdale Road
White Plains, N.Y. 10605
914-428-8401

EXHIBIT 21

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

CAROLE NEWMARK,

Plaintiff,

07-CIV-2861 (CLB)

-against-

**ANSWER TO THE
FIRST AMENDED
COMPLAINT**

LAWRENCE HOSPITAL CENTER,
PAT ORSAIA, individually, and CATHY
MAGONE, individually

Defendants.

Defendants Lawrence Hospital Center (the "Hospital") and Catherine Magone, by their attorneys, Collazo Carling & Mish LLP, for their Answer to the First Amended Complaint herein:

1. Deny the allegations contained in paragraph 1 of the First Amended Complaint, except admit that this action purports to assert claims pursuant to the Age Discrimination in Employment Act, 29 U.S.C. § 621 *et seq.*, and the New York State Human Rights Law, Section 290 *et seq.* of the New York State Executive Law.
2. Admit the allegations contained in paragraph 2 of the First Amended Complaint.
3. Deny knowledge or information sufficient to form a belief as to the truth of the allegations contained in paragraph 3 of the First Amended Complaint, except admit that Newmark ("plaintiff") has a Master of Social Work degree.
4. Admit the allegations contained in paragraph 4 of the First Amended Complaint.
5. Deny the allegations contained in paragraph 5 of the First Amended Complaint, and aver that Magone's title is Director of Clinical Quality and Case Management.

6. Deny the allegations contained in paragraph 6 of the First Amended Complaint, except admit that Orsaia's title was Director of Human Resources, and admit that Magone and Orsaia had authority to terminate Newmark.

7. Deny the allegations contained in paragraph 7 of the First Amended Complaint, except admit that plaintiff was hired in March 2006.

8. Deny the allegations contained in paragraph 8 of the First Amended Complaint, except admit that Nicole Serra was hired by the Hospital as a Social Worker.

9. Deny the allegations contained in paragraph 9 of the First Amended Complaint.

10. Deny the allegations contained in paragraph 10 of the First Amended Complaint, except admit that Magone and Orsaia met with plaintiff to discuss her complaint.

11. Deny the allegations contained in paragraph 11 of the First Amended Complaint, except admit that Magone denied making any discriminatory remarks.

12. Deny the allegations contained in paragraph 12 of the First Amended Complaint, except admit that the Hospital terminated plaintiff on October 5, 2006.

13. Deny the allegations contained in paragraph 13 of the First Amended Complaint.

14. Repeat and incorporate the responses contained in paragraphs 1 to 13 herein.

15. Deny the allegations contained in paragraph 15 of the First Amended Complaint.

16. Repeat and incorporate the responses contained in paragraphs 1 to 15 herein.

17. Deny the allegations contained in paragraph 17 of the First Amended Complaint.

18. Repeat and incorporate the responses contained in paragraphs 1 to 17 herein.

19. Deny the allegations contained in paragraph 19 of the First Amended Complaint.

20. Repeat and incorporate the responses contained in paragraphs 1 to 19 herein.

21. Deny the allegations contained in paragraph 21 of the First Amended Complaint.

AS AND FOR A FIRST AFFIRMATIVE DEFENSE

22. Plaintiff failed to exhaust her administrative remedies with respect to her retaliation claims against defendants.

WHEREFORE, defendants demand that judgment be entered in its favor dismissing this action in its entirety, awarding to defendants their costs, inclusive of attorney's fees, and such other relief as the Court may deem just and proper.

Dated: New York, New York
October 23, 2007

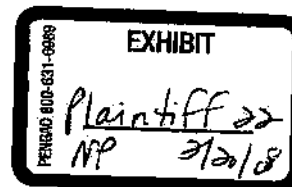
COLLAZO CARLING & MISH LLP

By: John P. Keil
John P. Keil (JK 2794)
Attorneys for Defendants
Lawrence Hospital Center and
Catherine Magone
Office and P.O. Address
747 Third Avenue
New York, New York 10017
(212) 758-7862

To: Drita Nica (DN 0966)
Lovett & Gould, LLP
Attorneys for Plaintiff
222 Bloomingdale Road
White Plains, New York 10605
(914) 428-8401

EXHIBIT 22

**Lawrence Hospital Center
Management Performance Appraisal**



Employee Name: Catherine Magone Job Title: Director
 Department: Clinical Quality and Case Management Date: 2/23/2004

Review: ☐ Training period ☒ Annual ☐ Special Period of Review: _____

Part I

ATTAINMENT OF ANNUAL OBJECTIVES: List your mutually agreed upon individual objectives and the corresponding degree to which they have been satisfied (results achieved). Add additional sheets, if necessary.

INDIVIDUAL OBJECTIVES	RESULTS ACHIEVED
Reduce the Medicare LOS	Medicare LOS reduced from 7.1 to 6.7 resulting in a savings of \$3.7 million.
Under the leadership of the Medical Director, initiated Clinical Risk and Patient Safety Program	Initiated weekly Clinical Risk and Patient Safety Committee Meetings. Promoted "I can Prevent Risk" Campaign. Developed Patient Safety news letter and completed two editions. Began patient safety rounds. Revised policies and procedures. Revised current incident report to capture better information.
Reduce the number of insurance denials.	Reduced the number of insurance denials from 391 in 2002 to 283 in 2003. Reduced the number of denied days from 770 in 2002 to 613 in 2003 (savings of approx \$157,000)

RATINGS:

Some Improvement Desired – Meets most requirements. Consistent and/or needs significant management support.

Consistently Competent – Meets full requirements of the job and performs some key aspect in a superior fashion.

3. Frequently Above Standard: Exceeds most requirements and excels in all key aspects of performance.

4. Consistently Exceptional – Exceeds in all requirements and contributes substantially to organizational results.

MANAGEMENT STANDARDS OF PERFORMANCE	RATE	COMMENTS
Budgetary Planning Creates accurate and realistic budgets. Tracks and adjusts expense to meet changing hospital needs. Monitors and adjusts operations accordingly without impairing quality and efficiency.	3	
Leadership Effectiveness in motivating and building morale, eliciting cooperation from subordinates and associates and getting results through people. Develops a shared sense of purpose, is persuasive, fair and sets high team standards.	3	
Managing Performance Establishing clear performance standards. Conducts evaluations in a timely fashion and resolves performance problems. Is direct but tactful, providing guidance and support.	3	
People Development and Management Provides feedback, training and coaching for subordinates to achieve their maximum potential. Creates clear development goals and plans. Exhibits consistent application of policies and procedures. Rewards employees. Encourages individual growth. Defines roles and responsibilities. Practices collaborative management.	3	Attempt to promote teamwork but have been unsuccessful in eliminating staff unrest. why?
Project Management Establishes project goals and milestones. Develops procedures and systems. Defines roles, responsibilities, and project resources. Effectively coordinates projects.	4	Team leader for ED Patient Satisfaction team resulting in improved scores in patient satisfaction.
Decision Making Makes thoughtful, systematic decisions. Utilizes good judgment in making decisions. Gets input, considers all available information, builds consensus, includes others. Considers impact of decisions.	4	EXCELLENT JUDGMENT BASED ON VALUES
Meeting Management Holds appropriate number of meetings. Sets meeting goals. Develops and follows an agenda. Adequately prepares for a meeting. Involves appropriate people and encourages a balancing input.	4	Holds monthly department meetings, LOS meetings. Responsible for Coordinating all Hospital Quality Improvement Committees - agendas, reports, minutes, etc
Planning and Organization Develops realistic plans. Effective in setting future goals, setting priorities and use of time. Balances short and long term goals. Aligns plans with hospital strategic plan. Achieves results with minimum direction.	4	Met objectives and achieved positive results. ALWAYS

Results Focus Targets and achieves results. Establishes goals and prioritizes tasks. Overcomes obstacles. Accepts accountability. Establishes team standards and responsibilities. Creates a results-focused environment.	4	Successfully achieved goals. BOTH LARGE AND SMALL
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GENERAL STANDARDS

	Rate	Comments
Communication Effective in expressing information in a clear and coherent fashion. Produces accurate, punctual reports. Is an effective, active listener.	3	4 - PEOPLE LISTEN AND RESPECT AND INTEREST
Dependability Meets commitments, work standards. Works independently. Accepts accountability. Handles change. Stays focused under pressure. Meeting attendance requirements are met.	4	Totally
Job Knowledge Understands job duties and responsibilities. Has necessary job skills, technical skills, and equipment skills. Keeps current with new developments.	4	Attends conferences, Maintains certification in Healthcare Quality. TOTAL COMMAND
Initiative Tackles problems. Takes independent action. Seeks out new responsibilities. Recognizes and acts on opportunities. Generates new ideas. Exhibits self-development.	4	Requested to be a part of the team that went for the Ritz Carlton Training. Member of Service Excellence Team. Educated self on principles of Risk Management through readings, conference.
Delegation Effective in delegating and following up regularly to ensure that delegated duties and responsibilities are carried out.	3	
Analytical Ability and Judgment Anticipates and prevents problems. Defines problems. Obtains adequate facts. Generates alternative solutions, and selects appropriate solution. Makes thoughtful and timely decisions.	3	
Innovation Exhibits effectiveness in developing new ideas, concepts and approaches. Applies imagination to the position. Willing to challenge the status quo.	3 4	Developed the patient safety newsletter. MANIFESTATION TO ALWAYS DO MORE.
Interpersonal Skills Is perceived as enthusiastic, competent, fair and is respected by peers and subordinates. Is people oriented and possesses a sense of humor. Is flexible and open minded.	3	

Age Specific Performance Evaluation: Indicate your evaluation by inserting the appropriate letter in each column.
Method: T= Written/Post Test; V= Verbal Test; P= Peer Review; D=Documentation; SLM= Self Learning Module;
S= Skills Observation

C= Competent; NI= Needs Improvement; NA= Not Applicable to Employee

	Method	Neonatal	Pediatric	Adoles.	Adult	Geriat

JOB SPECIFIC STANDARDS

Rate

Comments

Responsible for planning and implementing the Quality Improvement program. Evaluates program and effects changes as needed to improve program and ensure compliance with regulatory standards.	3	Responsible for the hospital wide PI Program. Incorporated patient Satisfaction into Departmental PI. Working with Department Managers to develop patient safety indicators. Revised the PI and Patient Safety Plan.
Responsible for overseeing the completion and submission of NYPORT data to the DOH.	3	Conducts RCA's. In conjunction with the assistant Director of Quality and the Medical Director investigates all events.
Responsible overseeing the preparation and ensuring compliance with plans of correction submitted to the department of health.	4	Coordinates responses with the Medical Director and other appropriate parties.
Oversees Utilization Management / Case Management Program and ensures compliance with regulatory agencies while maintaining high quality patient care.	3	Acts as IPRO Liaison and HCQIP Liaison. Oversees denial management program.
Has knowledge of JCAHO standards and ensures compliance in responsible areas.	4	Attends JCAHO educational sessions and keeps current with updates/changes.
Oversees the Root Cause Analyses done in response to sentinel events.	3	

STANDARDS FOR CORE VALUES

	Rate	Comments
Quality Performs high quality work and is a role model and example to others. Encourages other to always strive for excellence. Ensures the proper education, training and skills are available for getting the job done.	3 4	
Respect Demonstrates sensitivity and high regard for the worth, dignity and cultural characteristics of others. Communicates in a courteous and pleasant manner. Avoids blaming others. Discusses problems with those involved, not with others. Protects the patients' right to privacy.	3 4	
Integrity Fosters and demonstrates honesty in all circumstance and communications. Accepts responsibility for own actions. Follows through on promises and commitments. Considers the values in all decisions related to the hospital and our service.	3 4	
Teamwork Fosters inter/intradepartmental participation in care and services. Avoids negative criticism and blaming others. Goes above and beyond to assist the hospital team meet the needs in caring for our patients. Willing to lend a hand.	3 4	

Overall Rating:

/

Consistently
Exceptional

Frequently Above
Standard

Consistently
Competent

Improvement
Desired

EMPLOYEE COMMENTS: Please state your comments regarding this appraisal.

PRAISER'S COMMENTS (results of interview):

Discussed methods to do time and/or
eliminate staff waste.
2004 Plans

Appraised by: Werner Z. Lueden

3.2.04

Date

Reviewed by: C

Date

This appraisal was reviewed with me on:

2/2/04
Date

Carlene Morgan
Employee Signature

EXHIBIT 23

Carole Newmark

Page 1

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

-----)

CAROLE NEWMARK,

Plaintiff,

vs.

07-CIV-2861

LAWRENCE HOSPITAL CENTER, (CLB)

PAT ORSAIA, individually, and

CATHY MAGONE, individually,

Defendants.

-----)

DEPOSITION OF CAROLE NEWMARK

New York, New York

Wednesday, March 5, 2008

Reported by:
Linda Salzman
JOB NO. 201131

Carole Newmark

Page 2

1
2 March 5, 2008
3 10:00 a.m.

4 Deposition of CAROLE NEWMARK, the
5 Plaintiff herein, held at the offices of
6 Collazo, Carling & Mish, LLP, 747 Third
7 Avenue, New York, New York, pursuant to
8 Notice, before Linda Salzman, a Notary
9 Public of the State of New York.
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Page 4

1
2 IT IS HEREBY STIPULATED AND AGREED,
3 by and between the attorneys for the
4 respective parties herein, that filing
5 and sealing be and the same are hereby
6 waived.

7 IT IS FURTHER STIPULATED AND AGREED
8 that all objections, except as to the
9 form of the question, shall be reserved
10 to the time of the trial.

11 IT IS FURTHER STIPULATED AND AGREED
12 that the within deposition may be sworn
13 to and signed before any officer
14 authorized to administer an oath, with
15 the same force and effect as if signed
16 and sworn to before the Court.
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Page 3

1
2 APPEARANCES:

3
4 LOVETT & GOULD, LLP
5 Attorneys for Plaintiff
6 222 Bloomingdale Road
7 White Plains, New York 10605
8 BY: DRITA NICAJ, ESQ.
9

10
11 COLLAZO CARLING & MISH, LLP
12 Attorneys for Defendants
13 747 Third Avenue
14 New York, New York 10017
15 BY: JOHN P. KEIL, ESQ.
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Page 5

1
2 CAROLE NEWMARK,
3 called as a witness, having been duly
4 sworn by a Notary Public, was examined
5 and testified as follows:

6 EXAMINATION BY
7 MR. KEIL:

8 Q. Good morning, Ms. Newmark. My name
9 is John Keil. I represent Lawrence Hospital
10 and Cathy Magone in this matter, as well as
11 Pat Orsaia, who's not a party.

12 Do you understand that you're under
13 oath?

14 A. Yes, I do.

15 Q. Have you ever had your deposition
16 taken before?

17 A. No, I haven't.

18 Q. Have you ever testified under oath
19 before?

20 A. No, I haven't.

21 Q. And you've seen the way depositions
22 work from the prior ones you have attended in
23 this matter?

24 A. Yes.

25 Q. So I will ask you questions.

2 (Pages 2 to 5)

Carole Newmark

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You're expected to answer those questions fully and truthfully to the best of your recollection. Please wait for me to finish my questions before you respond, and please make sure you answer out loud and in words so the court reporter can take down your response.

Do you understand all that?

A. Yes, I do.

Q. If at any time you don't understand my question, will you let me know?

A. I will.

Q. If at any time during the deposition today you realize that a prior answer you gave me was incorrect or incomplete, will you let me know?

A. Yes, I will.

Q. And if you need to take a short break at any time, please let me know and we can arrange that as soon as you answer whatever question may be pending.

Okay?

A. Yes.

Q. Are you taking any medication that

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immediate supervisor prior to your termination?

A. About four months.

Q. Do you recall the date when she became your immediate supervisor?

A. I think it was in June or July. I'm not sure.

Q. June or July of '06?

A. Of '06.

Q. Was there anyone else that you reported to during your employment at Lawrence Hospital?

A. Yes, Diane Lance.

Q. And over what he period of time did you report to Ms. Lance?

A. From March 2006 until somewhere around June or July '06, when she left.

Q. Was there anyone else who was your immediate supervisor while you were at Lawrence?

A. No.

Q. Who gave you assignments while you were employed at Lawrence?

MS. NICAJ: Objection.

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C. Newmark

would interfere with your ability to remember or tell the truth today?

A. No.

Q. Can you think of any reason why you would not be not be able to answer my questions fully and truthfully today?

A. No.

Q. What was your position at Lawrence Hospital?

A. I was senior social worker.

Q. Did you work a particular shift or have particular hours?

A. I worked from 8:00 a.m. to 4:00 p.m.

Q. Were those your hours of work for the entire time that you were employed?

A. Yes.

Q. When did your employment start with Lawrence Hospital?

A. It started on March 2006.

Q. And at the time your employment was terminated, who was your supervisor?

A. My supervisor was Cathy Magone.

Q. How long had Ms. Magone been your

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You can answer.

A. My assignments came from various sources. They came off a daily run of patients that was taken off the fax machine. They were spontaneously given to me by the case managers. They were spontaneously given to me by nurses, by doctors. That's how I got my assignments for the day.

Q. What form did these assignments take?

A. I would be called either on my phone or my beeper or in person, or even just walking through the halls. I would be stopped and asked to do something by someone who needed me.

Q. Was there a typical or regular task that you were asked to perform?

A. The tasks were assisting the case manager, basically assisting the case managers in providing discharge planning. My piece -- in particular, my piece was the behavioral health piece.

Q. And what was the behavioral health piece?

3 (Pages 6 to 9)

Carole Newmark

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1 C. Newmark
 2 A. That was working with families and
 3 patients and working through emotional
 4 issues, psychiatric issues, working through
 5 problems that arose within families and
 6 patients. Just helping them get through the
 7 hospital stay.
 8 Q. Who, if anyone, provided you
 9 evaluation or feedback on your performance
 10 while you were at Lawrence Hospital?
 11 A. Cathy Magone and Diane Lance, when
 12 she was there.
 13 Q. Why were you fired?
 14 A. Why was I fired? I was told when
 15 they terminated me on October 5th that I was
 16 not a good fit, that there were attendance
 17 issues, punctuality issues, there were issues
 18 relating to the general work.
 19 Q. Do you have any reason to doubt
 20 what you were told?
 21 A. Yes.
 22 Q. What are those reasons?
 23 A. I performed the job duties as
 24 delineated by Ms. Magone and Ms. Lance to the
 25 best of my ability. I was always on time. I

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1 C. Newmark
 2 worked many hours overtime. So there was not
 3 a punctuality issue. I was very cohesive
 4 with my co-workers. There were problems in
 5 the beginning, which I believe had been
 6 worked out. And I was a loyal and
 7 trustworthy employee to Lawrence Hospital.
 8 Q. What do you believe to be the
 9 reason why you were fired?
 10 A. I believe that I went to HR to
 11 discuss an issue of ageism, and I believe
 12 from that point on my relationship with Cathy
 13 Magone had changed, and I believe that I was
 14 let go in retaliation for going to HR.
 15 Q. What's your basis for believing
 16 that?
 17 A. My basis for believing that, the
 18 ageism piece is related to a comment that
 19 Cathy Magone made to me on August the 13th,
 20 '06. And I believe that once I went to HR,
 21 Cathy Magone felt I was out of order, or out
 22 of line perhaps, and began to find reasons to
 23 let me go and not pass my probation.
 24 Q. But what is the basis for your
 25 belief that Cathy Magone felt you were out of

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1 C. Newmark
 2 line and looked for reasons to let you go
 3 because of your complaint?
 4 MS. NICAJ: Objection.
 5 You can answer.
 6 A. Can you rephrase that so I can
 7 better understand?
 8 Q. You've testified to your belief as
 9 to -- your belief that Cathy Magone's reasons
 10 for firing you were related to your complaint
 11 about a comment that she had made.
 12 What is your -- why do you
 13 attribute that motivation to Cathy Magone?
 14 A. Because up until that time there
 15 were no warnings, there were no major issues
 16 that came about that were related to me in
 17 any way, shape or form that led me to believe
 18 that there was a problem.
 19 Q. Was there anything else that
 20 supports your belief?
 21 A. I can't think of anything at this
 22 time.
 23 Q. Was there anything that Cathy
 24 Magone said that led you to believe that her
 25 decision was related to the complaint you had

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1 C. Newmark
 2 made about her?
 3 A. Can you repeat that?
 4 MR. KEIL: Can you read that back,
 5 please?
 6 (Whereupon, the requested portion
 7 was read back by the court reporter.)
 8 A. Not that I can recall. Excuse me,
 9 other than she denied making that statement.
 10 Q. How does that -- how do you see
 11 that supporting your belief?
 12 A. Because she denied saying something
 13 to me that prompted me to go to HR, and I
 14 believe that she was angry with me for going
 15 to HR and for bringing up something that she
 16 denied happened. I don't know if I'm
 17 answering exactly the way you would like me
 18 to.
 19 MS. NICAJ: Don't worry about the
 20 way he would like you to. You answered
 21 the question.
 22 Q. Your obligation is to tell the
 23 truth to the best of your recollection.
 24 That's all I'm looking for.
 25 A. Okay.

4 (Pages 10 to 13)

Carole Newmark

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1 C. Newmark
 2 Q. What did Cathy Magone say or do
 3 that made you believe that she was angry with
 4 you because you had complained?
 5 MS. NICAJ: Objection.
 6 You can answer.
 7 A. Her entire demeanor and attitude
 8 towards me had changed. I was overlooked in
 9 several instances where other people weren't
 10 for various things that were going on in the
 11 hospital. Ms. Magone, just her whole
 12 attitude changed towards me. That's the
 13 basis of my belief that she was angry with me
 14 for going to HR with something that she said.
 15 Q. When you say that her entire
 16 demeanor and attitude changed, what do you
 17 mean by that?
 18 A. She wouldn't meet with me as
 19 frequently. She wouldn't make eye contact
 20 with me. Her whole demeanor changed. We had
 21 something at Lawrence Hospital called a Big
 22 Heart and a Little Heart, which was when you
 23 were nominated -- you were nominated by
 24 patients or staff for deeds well done.
 25 I received two of them. Cathy

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1 C. Newmark
 2 Magone never acknowledged them. As a matter
 3 of fact, one day there was two of them, one
 4 for someone else and mine right underneath
 5 it, and in a staff meeting she was very happy
 6 to announce the one that was on top and not
 7 mine. And I felt that, you know, that that
 8 was rather subjective.
 9 Q. When did that happen?
 10 A. I can't recall the date.
 11 Q. Do you recall the month?
 12 A. Perhaps in September of '06.
 13 Q. How did you find out that you had
 14 been nominated for this award?
 15 A. There is a statement that was given
 16 to me and to my supervisor, and they're very
 17 rare.
 18 Q. Do you have a copy of that
 19 statement?
 20 A. I believe I have a copy of one of
 21 them.
 22 Q. There was only one produced in
 23 discovery. Is that the one you're referring
 24 to?
 25 A. Probably. There's another one

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1 C. Newmark
 2 also, which I don't have a copy of because I
 3 was never given a copy of it.
 4 Q. When was the date of this other
 5 one?
 6 A. Perhaps April of '06. I don't
 7 recall the exact date.
 8 MR. KEIL: Can the court reporter
 9 please mark this as Defendants' Exhibit
 10 A.
 11 (Defendants' Exhibit A, Big Heart
 12 award nomination, marked for
 13 identification, as of this date.)
 14 Q. Ms. Newmark, I'm going to show you
 15 what's been marked as Defendants' Exhibit A.
 16 Do you recognize this document?
 17 A. Yes.
 18 Q. Is this one of the Big Heart award
 19 nominations that you were referring to?
 20 A. Yes, it is.
 21 Q. Was this for the April -- does this
 22 reflect the April nomination?
 23 A. Yes, it does.
 24 Q. So is this the Big Heart award you
 25 received a copy of?

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1 C. Newmark
 2 A. Yes, I received a copy of this one
 3 and it was posted on a board.
 4 Q. Which board was it posted on?
 5 A. The secretary's office. There was
 6 a general board for postings.
 7 Q. In the department of case
 8 management and social work?
 9 A. Yes, that's correct.
 10 Q. So the nomination that you said you
 11 believe may have been in September, is the
 12 one you didn't receive a copy of?
 13 A. That's correct.
 14 Q. Do you know who submitted that
 15 nomination?
 16 A. Yes, I do. It was a co-worker. It
 17 was, I believe, I'm not sure, I believe it
 18 was a nurse's aide.
 19 Q. Do you know the name of that
 20 individual?
 21 A. I don't.
 22 Q. How did you find out that this one
 23 had been submitted, the September nomination?
 24 A. Actually, my daughter worked for
 25 the department of excellence at Lawrence

5 (Pages 14 to 17)

Carole Newmark

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1 C. Newmark
 2 Hospital, and all of the Big Heart and Little
 3 Heart awards were given through her
 4 department. And so when she received it, she
 5 let me know that I received this.
 6 Q. Did she let you know you had
 7 received it before or after your termination
 8 from employment?
 9 A. Before.
 10 Q. Approximately how long before?
 11 A. Approximately September,
 12 mid-September. I'm not sure.
 13 Q. You're not sure?
 14 A. I'm not sure. I do have
 15 documentation at home in regard to it.
 16 Q. What sort of documentation do you
 17 have?
 18 A. I have a letter that was given --
 19 that was sent from the department of
 20 excellence to, I believe to Cathy Magone.
 21 Q. And you testified earlier that you
 22 said that one of the ways in which you
 23 perceived Cathy Magone's demeanor and
 24 attitude to change was that she met with you
 25 less frequently?

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1 C. Newmark
 2 A. She met with me less frequently.
 3 She just didn't have the same rapport with me
 4 that she had on the onset of my working at
 5 Lawrence Hospital.
 6 Q. How would you describe your rapport
 7 with Cathy Magone at the beginning of your
 8 work?
 9 A. At the beginning, it was amicable.
 10 I really didn't have much to do with her
 11 because I was reporting directly to Diane
 12 Lance, but it was cordial. It was not bad.
 13 Q. Did your working relationship with
 14 Cathy Magone stop being cordial at some
 15 point?
 16 A. Yes.
 17 Q. When?
 18 A. I would have to say after I went to
 19 HR.
 20 Q. Why do you say that?
 21 A. Because it's the truth. Because
 22 that's what happened.
 23 Q. What did Cathy Magone do after you
 24 went to HR that you would characterize as a
 25 change in her being cordial to you or not?

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1 C. Newmark
 2 MS. NICAJ: Objection.
 3 You can answer.
 4 A. She, as I said before, she stopped
 5 making eye contact with me. She stopped
 6 meeting with me. She was rather dismissive
 7 with me. I'd ask a question or I'd raise an
 8 issue and she would ignore it in meetings, in
 9 staff meetings.
 10 Q. What questions did you ask that she
 11 ignored?
 12 A. Just general comments, or I just
 13 made a general comment or asked a question
 14 and she just didn't answer it, or just went
 15 on to something else.
 16 Q. What would be an example of a
 17 comment you made?
 18 A. Maybe something in regard to a
 19 patient or in regard to something we were
 20 doing, and I would make a comment, and in the
 21 beginning she would be very responsive to me
 22 and she became less responsive.
 23 Q. When you say she met with you less
 24 frequently, you're referring to one-on-one
 25 meetings?

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1 C. Newmark
 2 A. Yes.
 3 Q. Or some other?
 4 A. One-on-one.
 5 Q. At the beginning of your employment
 6 at Lawrence while Diane Lance was your
 7 supervisor, how often did you meet with Cathy
 8 Magone?
 9 A. I didn't.
 10 Q. Not at all?
 11 A. No, no, except for -- we had what
 12 they called lineup in the morning, which is a
 13 Ritz Carlton prototype where everyone lines
 14 up and you discuss what's going to be done
 15 for the day. That occurred at 10:00 a.m. in
 16 the morning.
 17 Q. 10:00 a.m. every day?
 18 A. Yes.
 19 Q. That continued after Diane Lance
 20 left?
 21 A. Yes, it was a mandate at the
 22 hospital.
 23 Q. After Diane Lance left, how often
 24 did you meet with Cathy Magone?
 25 A. We all met with Cathy Magone in the

6 (Pages 18 to 21)

Carole Newmark

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1 C. Newmark
 2 mornings. And she would meet with me
 3 sporadically. There was not an agenda set or
 4 a set time where she would meet with me. If
 5 she needed to ask me a question, she would
 6 ask me to come up and ask me a question. It
 7 wasn't formal.
 8 Q. Did it happen at least once a week?
 9 A. Yes.
 10 Q. At least four times a week?
 11 A. Perhaps.
 12 Q. Were there weeks when it happened
 13 more often than that?
 14 A. Not really. We would also see each
 15 other in the hallways or on a unit.
 16 Q. After you complained to Human
 17 Resources, how often did you meet with Cathy
 18 Magone?
 19 A. I don't think I did meet with
 20 Cathy.
 21 Q. Not once?
 22 A. Afterwards, let me just get my --
 23 not for any specific reason. We would meet
 24 in the mornings at lineup or we would meet on
 25 a unit where she would ask me how things are,

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1 C. Newmark
 2 how is it going, you know, but it wasn't a
 3 formal meeting.
 4 Q. So your testimony is after you
 5 complained to Human Resources, you did not
 6 have any further private meetings with Cathy
 7 Magone of any kind?
 8 A. Not that I recall.
 9 Q. You testified you believe you were
 10 overlooked in several instances where other
 11 people weren't.
 12 Do you remember that testimony?
 13 A. Yes, I do.
 14 Q. What were you referring to?
 15 A. I was referring to the Big Heart,
 16 Little Heart.
 17 Q. Was there anything else?
 18 A. Not that I can recall.
 19 Q. So when you said several instances,
 20 you were just referring to the -- to these
 21 two Big Heart award issues?
 22 A. It was that, and there were subtle
 23 things that I can't recall at this point, but
 24 there were.
 25 Q. When did you first begin to believe

Page 24

1 C. Newmark
 2 that your termination was connected to your
 3 complaint to Human Resources?
 4 A. I have to be honest and say when I
 5 was terminated, because I didn't know they
 6 were terminating me.
 7 Q. So as of the date of your
 8 termination, you believe there was a
 9 connection between your termination and your
 10 complaint to Human Resources in August?
 11 A. Yes. It was a surprise to me.
 12 MR. KEIL: Can the court reporter
 13 please mark this as Defendants' Exhibit
 14 B.
 15 (Defendants' Exhibit B, Narrative,
 16 marked for identification, as of this
 17 date.)
 18 Q. Ms. Newmark, I'm showing you what's
 19 been marked as Defendants' Exhibit B. If
 20 you'd like can you take a moment to read
 21 through it.
 22 Do you recognize the document?
 23 A. Yes, I do.
 24 Q. Just let me know when you're ready.
 25 A. Yes.

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1 C. Newmark
 2 Q. Did you write the narrative in
 3 Defendants' Exhibit B yourself?
 4 A. Yes.
 5 Q. Did anyone help you?
 6 A. I don't think so.
 7 Q. Did you show it to anybody before
 8 you completed it?
 9 A. No. My lawyer.
 10 Q. I'm sorry?
 11 A. My lawyer.
 12 Q. Drawing your attention to the box
 13 immediately above the typewritten paragraph,
 14 you see the top of it says, "Cause of
 15 discrimination based on, check appropriate
 16 boxes"?
 17 A. Yes.
 18 Q. And there are two Xs next to the
 19 word age?
 20 A. Yes.
 21 Q. Did you put those Xs there?
 22 A. No.
 23 Q. Do you know who did?
 24 A. This was typed by my attorney's
 25 office, I believe.

7 (Pages 22 to 25)

Carole Newmark

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1 C. Newmark
 2 Q. Did you type the paragraph that
 3 appears on Exhibit B yourself?
 4 A. No.
 5 Q. Were you shown Exhibit B before it
 6 was filed?
 7 A. Yes, I signed it.
 8 Q. And at that time, did you agree
 9 with the checking of the box next to the word
 10 age?
 11 A. Yes.
 12 Q. Why, if you know, was the box next
 13 to the word retaliation not checked?
 14 A. I'm not sure.
 15 Q. Did you review the original
 16 complaint that was filed in Federal Court in
 17 this matter before it was filed?
 18 A. Yes.
 19 Q. Were you aware that your complaint
 20 was amended in October of 2007?
 21 A. I'm not sure.
 22 Q. You're not aware of that?
 23 A. I'm not sure.
 24 Q. When did you first find out that
 25 you were going to be fired from Lawrence

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1 C. Newmark
 2 Hospital?
 3 A. On October 5, 2006.
 4 Q. What time of day did you find out?
 5 A. At exactly 3:30. Correction. I
 6 can give you an approximation of 3 o'clock.
 7 Q. 3 o'clock is your best
 8 recollection?
 9 A. That's my best recollection,
 10 correct.
 11 Q. Where were you when you found out
 12 you were going to be fired?
 13 A. I was in the intensive care unit.
 14 Q. And what were you doing at the
 15 time?
 16 A. I was working with a psychotic
 17 patient who needed discharge to a facility,
 18 an inpatient mental health facility. I had
 19 been working on that case for about an hour.
 20 Q. And how did you find out that you
 21 were going to be fired?
 22 A. I went to -- I was in the ICU. I
 23 got a call on my beeper. I returned the call
 24 to Cathy Magone. She said, "Please come up
 25 to my office."

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1 C. Newmark
 2 I said, "Do you need me right now?
 3 I'm working with this case that has to be
 4 transferred to an inpatient psychiatric
 5 facility."
 6 She said, "You are no longer on the
 7 case. Nicole Serra is. Come up to my office
 8 immediately."
 9 Q. Did you do that?
 10 A. I did.
 11 Q. Who was present at Cathy Magone's
 12 office when you arrived?
 13 A. Pat Orsaia.
 14 Q. And Cathy Magone?
 15 A. Yes, of course.
 16 Q. And how did the meeting begin?
 17 A. I sat down, Pat Orsaia said -- I
 18 can't say verbatim, but she said that we were
 19 meeting because I was not a good fit at
 20 Lawrence Hospital, and they were terminating
 21 my employment there.
 22 Q. You don't recall the precise words
 23 that Ms. Orsaia used?
 24 A. Not exactly, but that's as close
 25 as --

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1 C. Newmark
 2 Q. Did Ms. Orsaia say anything else?
 3 A. She proceeded to -- actually, I was
 4 in shock, so I may not have heard a lot of
 5 what she said, but she proceeded to tell me
 6 that it wasn't working out and that I was to
 7 get my belongings together, empty my office,
 8 and leave the premises immediately, and that
 9 I had an hour to do that.
 10 Q. Did she say anything else?
 11 A. Not that I recall. She gave me
 12 some paperwork. She gave me termination
 13 letters and some other paperwork that she
 14 wanted me to see. She said I was entitled to
 15 COBRA. She went over the basics of, I guess
 16 what people do when they're fired. I have
 17 never been fired before, so I don't know what
 18 the procedure is.
 19 Then Cathy Magone kind of threw my
 20 evaluation at me. She pushed it across the
 21 desk. Pat Orsaia asked me to read it. I
 22 asked her if I could read it when I left. I
 23 believe I did look at it, I flipped through
 24 it. There was some exchange of words, you
 25 know, between Cathy and Ms. Magone and Pat

8 (Pages 26 to 29)

Carole Newmark

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1 C. Newmark
 2 Orsaia, and then I was told that Cathy Magone
 3 would escort me out of the building.
 4 At that point, I asked if a
 5 security guard could escort me because I
 6 didn't trust her.
 7 Q. Why didn't you trust her?
 8 A. I just didn't.
 9 Q. No particular reason?
 10 A. I didn't trust her. I felt she was
 11 very volatile at times with other people.
 12 And I didn't want her to escort me out of the
 13 building, and I thought that the formality
 14 would be a security guard to take me back to
 15 my office.
 16 Q. When you say you had seen Cathy
 17 Magone be volatile with other people, what
 18 are you referring to?
 19 A. Her staff.
 20 Q. Which staff members?
 21 A. All the case managers.
 22 Q. Every single one?
 23 A. Just about.
 24 Q. How many times did you see this
 25 happen?

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1 C. Newmark
 2 A. Quite often.
 3 Q. Was it every day?
 4 A. I couldn't say every day.
 5 Q. Was it every week?
 6 A. I didn't see her that much, but
 7 when I did see her on the units with people,
 8 she was quite demanding.
 9 Q. When you say volatile, you're
 10 saying she was quite demanding?
 11 A. Demanding and maybe volatile is a
 12 little strong, but she would want her way and
 13 insist on having things her way.
 14 Q. How long did the meeting last?
 15 A. That meeting lasted about ten
 16 minutes.
 17 Q. How did it end?
 18 A. I got up, I took my paperwork with
 19 me, I proceeded to go to the elevator to go
 20 back to my office to empty the contents of my
 21 office, Cathy Magone escorted me. Pat Orsaia
 22 told me that a security guard would not
 23 escort me, that Cathy Magone would escort me.
 24 I thought that was very unusual,
 25 but I was kind of reeling from being fired,

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1 C. Newmark
 2 and I just picked up my stuff, went to my
 3 office, Cathy followed me, and I proceeded to
 4 put things into boxes and bags. And Cathy
 5 watched me do this. And I left.
 6 Q. Did you say anything to Cathy
 7 Magone before you left?
 8 A. Before I left?
 9 Q. Yes.
 10 A. I said absolutely nothing to her.
 11 Correction. She asked me if I needed a box
 12 or a wagon or something. And I said that
 13 would be helpful. And she went and got me a
 14 cart and I put things into my cart.
 15 Q. Did you say to her you're a
 16 terrible manager?
 17 A. I told her -- when the cart was
 18 emptied into my car, and I was no longer an
 19 employee there, I did tell her that.
 20 Q. So you used the words you're a
 21 terrible manager?
 22 A. No.
 23 Q. What words did you use?
 24 A. I don't say this proudly, but I
 25 told her that she was a fucked up person and

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1 C. Newmark
 2 that she was a fucked up manager, and that
 3 was after my employ there. I had an hour to
 4 get out. It was 4:15. And that was it.
 5 Q. It took you approximately an hour
 6 to pack up?
 7 A. Yes.
 8 Q. How did Cathy Magone respond to the
 9 words you used?
 10 A. She turned around and said, "Nice
 11 Carole, very nice."
 12 Q. When you said to her, "You're a
 13 fucked up manager," was there anything
 14 specific that you're referring to?
 15 A. Just the way she managed her people
 16 out of fear. I'm a very gentle person and I
 17 don't operate that way, so I found it
 18 unusual. I found it unusual how she --
 19 MS. NICAJ: Raise your voice.
 20 Q. Is there anything you wanted to add
 21 to that?
 22 A. Add to what?
 23 Q. Your prior answer. I didn't know
 24 if you had been interrupted.
 25 A. No.

9 (Pages 30 to 33)

Carole Newmark

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C. Newmark

Q. Was there anything in particular you were referring to when you said, "You're a fucked up person"?

A. It was just a release of emotion, I guess. It was a very tense hour for me.

Q. When did you first start to believe that Cathy Magone was a bad manager?

A. I got information prior to accepting the position that she was a very tough manager and not fair. I, being the person that I am, I thought I would come to my own conclusions about anyone that I met. So it was hearsay. And that's the first time that I heard certain things about Cathy Magone.

Q. But my question is, when did you first start to believe it?

A. About two months into my employ there.

Q. So approximately May, late May?

A. About that.

Q. Who had you received this prior information from?

A. Denise Galloway.

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C. Newmark

Q. What did she tell you?

A. That she was very difficult to work for. That Denise, who had worked for Lawrence Hospital, I believe, for over 28 years and had been a manager then, had to report to Cathy Magone when Cathy Magone came on board, and she kind of stripped her of any of her authority and decision-making responsibilities.

I was told that she was cold, that she really didn't care about people. Cathy was a bean counter. It was about money and getting patients in and out of the hospital.

Q. Is there anything else that Denise Galloway told you before you started work at Lawrence Hospital about Cathy Magone as a manager?

A. She said perhaps it's me. And it won't happen to you because I have been here so long. Perhaps you're a new person. Maybe it would be better for you.

Q. Did you hear this from Ms. Galloway before you accepted the position at Lawrence Hospital?

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C. Newmark

A. I did.

Q. How many conversations did you have with Ms. Galloway on this subject before you accepted employment?

A. Maybe one or two. Nothing extensive.

Q. How do you know Ms. Galloway?

A. Ms. Galloway was my supervisor when I was an intern at Lawrence Hospital in 1994 to '95. Denise Galloway was my supervisor, once again, when I graduated from college with my master's degree. She was my supervisor when I worked at Lawrence Hospital in 1997.

Q. Did you stay in touch with Ms. Galloway over the years after you left Lawrence Hospital?

A. Infrequently.

Q. Once a year?

A. Perhaps.

Q. Do you consider her a personal friend?

A. Yes. More so mentor than friend.

Q. You said that you started to reach

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your own conclusions about Cathy Magone as a manager approximately late May of 2006?

A. Yes.

Q. What happened that made you form that belief?

A. I was just observing, which is part of my job and part of what I do as a social worker and a psychotherapist, I observed how she treated people. I observed how people felt in her presence. I heard people talking about her and how frightened they were of her.

Q. Who did you perceive to be frightened of Cathy Magone?

A. Oh, there is a list of people, and I hope that I can remember all of their names.

Q. Do your best.

A. Kitty -- these are all case managers. Kitty, Lori Bachmann, Barbara. There's another case manager who left. I can't recall her name. These were people who have been at Lawrence Hospital for quite some time, and then there were new people who had

10 (Pages 34 to 37)

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2 -- who hadn't really made up their mind one
3 way or the other about how they felt about
4 her. There were a lot of new people, but
5 those were the people.

6 Q. What did Cathy Magone do
7 specifically that led you to conclude that
8 she managed through fear?

9 A. She was very demanding, very
10 demeaning in other people's presence on
11 units. She demanded to know what was going
12 on. That's part of her job, but in my
13 opinion, there is a way of relating to people
14 and she was forceful, demeaning at times,
15 dismissive of other people when she had
16 something to say.

17 Q. How old is the case manager? You
18 mentioned Kitty, how old is she?

19 A. Ballpark, late 50s.

20 Q. How old is Lori Bachmann?

21 A. Lori Bachmann was well into her
22 60s, also worked there for maybe 30 years.

23 Q. How old was Barbara?

24 A. 40s maybe.

25 Q. Did you ever discuss these

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2 observations you made about Cathy Magone with
3 other employees of Lawrence Hospital?

4 A. More like they discussed it with
5 me.

6 Q. Who discussed it with you?

7 A. Lori Bachmann.

8 Q. Anyone else?

9 A. Barbara. Nicole Serra. There may
10 have been others. I don't recall.

11 Q. Did Kitty say anything to you?

12 A. Kitty is a very passive woman who
13 internalizes whatever she feels and just
14 makes herself very ill. Woman spent most of
15 her time on the job in the bathroom feeling
16 sick because she couldn't keep up with Cathy
17 Magone's demands. She really didn't speak
18 much.

19 Q. Is that a no?

20 A. No.

21 Q. So just to make sure I understand,
22 your testimony is that these other
23 individuals that you've named expressed their
24 concerns to you about Cathy Magone, but you
25 didn't express your own observations with

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1 C. Newmark
2 them?

3 A. Not at the beginning, I didn't,
4 because I felt that it's in my nature to
5 allow people to present themselves as who
6 they are. And I always give people a chance.

7 And I don't come -- I'm not
8 reactive and I don't come to rash decisions
9 and I don't really take people's, you know,
10 what someone thinks about someone, I kind of
11 put it somewhere in the back of my head and
12 come to my own conclusions about people.

13 Q. When did you first express your
14 concerns about Cathy Magone to someone else
15 at Lawrence Hospital?

16 A. Ballpark, maybe, June.

17 Q. You don't remember the exact date?

18 A. I don't.

19 Q. Who did you express these concerns
20 to?

21 A. To Lori Bachmann, to Nicole Serra
22 to Denise Galloway, via telephone.

23 Q. Is there anyone else?

24 A. No, because I was busy working and
25 I don't like to get into gossip on the job,

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1 C. Newmark

2 you know, it's not something that I do.

3 Q. What did you say to Nicole Serra
4 about your perceptions of Cathy Magone?

5 A. At what time?

6 Q. At the time you started?

7 A. At the time I started, I didn't
8 really have any opinions of Cathy one way or
9 the other. I didn't have much to do with
10 her. Most of my interactions were with Diane
11 Lance, so she seemed okay, I guess. That's
12 what I told her.

13 Q. Allow me to clarify.

14 When did you first express your
15 concerns to Nicole Serra -- you said there
16 was a time when you started expressing them
17 to Nicole Serra.

18 A. Yeah.

19 Q. When was that?

20 A. Maybe the end of July, August.
21 More so August than July.

22 Q. What did you say to Nicole Serra at
23 that time?

24 A. That I made some observations, we
25 both made observations about Cathy Magone and

11 (Pages 38 to 41)

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1 C. Newmark
2 her management style and how dichotomous it
3 was to -- how we did our job as social
4 workers, and we had a very humane bend to
5 what we did, and it seemed to be very
6 business and very money-oriented when, you
7 know, when Magone talked about certain
8 things. There was no regard for patients or
9 their situations or family situations.

10 Q. Was that one conversation you had
11 with Nicole Serra?

12 A. It was probably several.

13 Q. Over what span of time, you said
14 beginning, end of July or August and lasting
15 how long?

16 A. It wasn't constant. It was when
17 anything came up that merited talking about
18 it at lunchtime or on a break.

19 Q. Did Nicole Serra say anything to
20 you about her observations of Cathy Magone?

21 A. Yes, she agreed with me. She
22 agreed we're very different. The way we
23 perform our work is very different from the
24 way nurses and managers perform their work.

25 Q. Was there anything else the two of

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1 C. Newmark

2 changed?

3 A. After I had gone to HR.

4 Q. How long after you had gone to HR
5 did you form that belief?

6 A. Immediately.

7 Q. The same day?

8 A. I wouldn't say the same day. Maybe
9 that week.

10 Q. What day did you go to Human
11 Resources?

12 A. I went to Human Resources on August
13 15, 2006.

14 Q. Do you recall whether there were
15 any union elections scheduled that week at
16 Lawrence Hospital, were you aware of that?

17 A. No.

18 Q. Were you aware of Pat Orsaia's
19 vacation schedule in August?

20 A. Not in detail, no. I know that
21 after I met with her she said there were
22 several courses of action. I could either
23 meet with Cathy Magone and discuss my
24 feelings. I could meet -- or I could meet
25 with the two of them.

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1 C. Newmark

2 you discussed about Cathy Magone?

3 A. I recall towards the end or middle
4 of September telling Nicole that I felt that
5 she held me to a different standard from
6 other people, and that's when I began to feel
7 that things were changing, really changing,
8 that she was kind of ignoring me and just
9 acting differently towards me than she had in
10 the beginning.

11 Q. So you felt that began in late
12 September?

13 MS. NICAJ: Objection.

14 You can answer.

15 A. August, September. When you have a
16 conversation with someone you don't really
17 jot down the dates, so I can't say for sure.

18 Q. I'm not asking about the date of
19 your conversation. I'm asking about the date
20 when you felt that things -- the date that
21 you thought that Cathy Magone's treatment of
22 you changed. I guess there are two questions
23 there.

24 The first is: When did you form
25 the belief that her treatment of you had

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1 C. Newmark

2 Those were the two options given to
3 me, and I opted for meeting with Cathy Magone
4 because I just felt that I don't have any
5 hidden agendas, and if I was going to work at
6 Lawrence Hospital, I wanted things to be
7 cleared and I didn't want any hard feelings,
8 and I just wanted to lay everything on the
9 table and talk about how I felt about the
10 ageism.

11 Q. Didn't you ask Pat Orsaia to speak
12 to Cathy Magone first and report back to you?

13 A. No, I didn't.

14 Q. Did she present that to you as an
15 option?

16 A. Not that I recall.

17 Q. What do you recall Pat Orsaia's
18 exact words to be during that conversation?

19 A. When I went to her on August 15th?

20 Q. That's correct.

21 A. Well, when I walked into the room,
22 Pat Orsaia, you know, greeted me, cordial, we
23 talked about the weather, we talked about
24 knickknacks in her office, we talked about
25 the Jersey Shore and it was very cordial, and

12 (Pages 42 to 45)

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then she asked me why I was there.

And I told her that this statement was made, you know, about Nicole being younger than me and could handle the job better than I can. And I thought it was quite fascinating that Pat Orsaia said to me, you know, Carole, I just want to let you know that there have been other people that have come here to complain about Cathy Magone.

And I was kind of taken aback, given my position as a social worker, confidentiality and people's rights are very important to me. And I thought that this was some -- it just didn't feel right that she would disclose this to me as soon as I walked in the door. And I kind of let it go. I didn't respond to it. I just said oh.

And she said yes, social workers have come in here, case managers have come in here. This has been an issue for awhile. And I just went on to talk about my business, because other people's business doesn't pertain to me.

Q. My question was what were the exact

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words that Pat Orsaia said to you in this meeting about your options about how to proceed?

A. She said I could meet with Cathy Magone alone and try to work this out. I didn't feel that I could trust Cathy Magone to work things out with me. Because I saw the way she treated other people and I didn't want to be treated that way, or we could meet together, the three of us, Pat, Cathy and myself, and that's what I opted for.

Q. When you communicated your concerns about what Cathy Magone had said to Pat Orsaia, what were the exact words that you had used in speaking to Ms. Orsaia?

A. Can you repeat that?

Q. What were the exact words you used to communicate your concern to Pat Orsaia about what Cathy Magone had said?

A. What I said to her was that I was called in to Cathy Magone's office, I believe it was on the 15th of August, '06, and that she had informed me that Nicole Serra was chosen for the -- to be the social worker

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dedicated to the palliative care center, and that I was very much surprised that this position was given to someone who was not there that long and didn't have the experience that I had.

And also, it was implied upon my taking the position at Lawrence Hospital and in my interview, my job interview with Cathy Magone, it was implied because there were no other social workers there, that the palliative care center was going to be something that everyone was looking forward to, and it would be a place where I could do my work, particularly the behavioral health piece, knowing that I came from a mental health background and that I was surprised when it was given to Nicole Serra.

And that the reason when I asked why was I not involved in that decision because Nicole Serra was supervised by me, she said that -- let me get this right -- that the decision was made and that's it.

And I said, "Well, Cathy, how was the decision made? Based on what?"

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And that's when she said to me, "Nicole Serra is younger than you are and can take things in better than you can or can absorb things better than you can" -- not absorb.

"Nicole Serra is younger than you are and can take things in better than you can."

Q. Those are the exact words that Cathy Magone said to you?

A. To the best of my recollection.

Q. And those are the exact words you communicated to Pat Orsaia?

A. Yes, I did. And I told Pat Orsaia that I felt that this was ageism.

Q. How did Ms. Orsaia respond?

A. She didn't really. She just listened to me. I think she said something like, are you sure that's what was said?

I said, "Yes, I'm absolutely sure. Why would I come here and tell you this if it were not true? Why would I do that?"

Q. Was there anything else that you said to Ms. Orsaia during that meeting?

13 (Pages 46 to 49)

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1 C. Newmark
 2 A. I asked her when my evaluation
 3 would be coming. I think it was close to the
 4 time when my evaluation was due. She said
 5 she couldn't answer that at the time. She
 6 didn't know.
 7 Q. Was there anything else?
 8 A. I don't recall at this point.
 9 Q. Apart from what you already
 10 testified to, did Pat Orsaia say anything
 11 else to you during this meeting?
 12 A. She said that sometimes people
 13 filter things out differently. That people
 14 filter things differently and that perhaps I
 15 didn't understand what she meant.
 16 I said I think I understood what
 17 she meant, but I would consider the fact that
 18 people do filter things out differently.
 19 Q. Did Pat Orsaia say anything else
 20 during this meeting?
 21 A. No.
 22 Q. Did you?
 23 A. I asked when we could meet, and she
 24 said she would set something up, and then I
 25 believe there were vacations all around, both

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1 C. Newmark
 2 myself and Pat and maybe even Cathy Magone,
 3 so it was postponed to a later time.
 4 Q. When was your vacation?
 5 A. It was in August. I want to say
 6 around August 3rd. I'm not sure.
 7 Q. So before your meeting with Pat
 8 Orsaia?
 9 A. I believe so. I don't recall when
 10 I had vacation. I know that I set it up
 11 prior to -- it was one of the things we had
 12 agreed to as terms of employment, because I
 13 had not had a vacation in quite some time,
 14 that I would take a week or so without pay,
 15 and they agreed and I did take that time.
 16 Q. Did you take any vacation time
 17 between your -- the day when you met with Pat
 18 Orsaia and your termination?
 19 A. I don't recall. I would have to
 20 look at an old calendar and see the exact
 21 dates that I was on vacation.
 22 Q. You believe you have a calendar
 23 that reflects that information?
 24 A. I might. I might.
 25 Q. Did you ever discuss your concerns

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1 C. Newmark
 2 about Cathy Magone with Maura Del Bene?
 3 A. Yes.
 4 Q. When did that happen?
 5 A. I'm not exactly sure when Maura Del
 6 Bene came on board. I want to say at the end
 7 of June, possibly the beginning of July.
 8 More so in June. I voiced my concerns to
 9 Maura, when Maura said things to me like boy,
 10 she's really something. And I said yeah,
 11 well, that's the way it is.
 12 We were basically talking about her
 13 demeanor with other people. I didn't write
 14 down any conversations I had with Maura or
 15 when it happened, so I can't give you dates.
 16 Keep in mind that I really didn't have many
 17 conversations with people because I was
 18 always busy doing something, so I didn't have
 19 time to sit and chat.
 20 Q. How many conversations did you have
 21 with Maura Del Bene about your concerns about
 22 Cathy Magone?
 23 A. A handful, two, three. I can't say
 24 for sure.
 25 Q. Do you believe these -- well, over

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1 C. Newmark
 2 what period of time did they take place? You
 3 believe the first was in June or July?
 4 A. No, no. That's when Maura Del Bene
 5 came on board. She is a psychiatric nurse
 6 and was very aware of people's behaviors and
 7 had commented to me on several occasions, and
 8 I don't know the dates because I don't jot
 9 these things down, but she had commented to
 10 me on many occasions that the behavior is
 11 really out there.
 12 Q. Meaning Cathy Magone's?
 13 A. Yes.
 14 Q. Did you ever have lunch with Maura
 15 Del Bene in the Chinese restaurant?
 16 A. Yes.
 17 Q. Near Lawrence Hospital?
 18 A. Yes.
 19 Q. How many times?
 20 A. Once.
 21 Q. And what was discussed during that
 22 conversation?
 23 A. The palliative care unit.
 24 Q. Do you recall when that discussion
 25 took place?

14 (Pages 50 to 53)

Carole Newmark

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1 C. Newmark
 2 A. I don't.
 3 Q. How long was the discussion?
 4 A. A lunchtime. Within 45 minutes or
 5 so.
 6 Q. Did you express any concerns or
 7 complaints about Cathy Magone to Maura Del
 8 Bene during that conversation?
 9 A. I don't recall.
 10 Q. You don't recall one way or the
 11 other?
 12 A. I don't recall if we spoke about
 13 Cathy. I believe we spoke about the
 14 palliative care unit and an upcoming trip to
 15 Ohio or somewhere. I don't remember where it
 16 was.
 17 Q. What were the specific topics that
 18 you discussed with Ms. Del Bene during that
 19 conversation?
 20 A. As far as I can recollect, we
 21 talked about daily work. We talked about the
 22 palliative care unit and my interest in it.
 23 She didn't say anything one way or another in
 24 regard to me working solely in the palliative
 25 care unit. I think that was the crux of it.

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1 C. Newmark
 2 General talk; some shop, some weather, some
 3 food.
 4 Q. Did you have a good working
 5 relationship with Ms. Del Bene?
 6 A. I thought so.
 7 Q. Did you have a good working
 8 relationship with Nicole Serra?
 9 A. Absolutely.
 10 Q. Did you have a good working
 11 relationship with the caseworkers?
 12 A. Not all of them.
 13 Q. Which ones did you not have a good
 14 working relationship with?
 15 A. In particular, Collette Gelardi
 16 G-E-L-A-R-D-I, I believe.
 17 Q. Anyone else?
 18 A. That I didn't have a good working
 19 relationship with?
 20 Q. That's correct.
 21 A. Not that I'm aware of.
 22 Q. When was the last time before today
 23 that you had contact with Denise Galloway?
 24 A. When was the last time?
 25 Q. Yes.

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1 C. Newmark
 2 A. That I spoke with her?
 3 Q. By telephone, by e-mail, meeting
 4 her in person?
 5 A. Before today?
 6 Q. Before today.
 7 A. Maybe yesterday or the day before,
 8 via e-mail.
 9 Q. What was the subject matter of the
 10 e-mail?
 11 A. We talked about how she's doing in
 12 North Carolina, where she lives, presently
 13 lives. We talked about her grandchildren.
 14 Talked about my having a deposition that I
 15 was anxious about.
 16 Q. When was the last time you had
 17 contact with Denise Galloway either by
 18 telephone, in person or by e-mail about your
 19 employment situation at Lawrence Hospital?
 20 A. I would have to say after I was
 21 terminated.
 22 Q. Would that be on or around of
 23 October 23rd of '06?
 24 A. It's as good a guess as any. I
 25 don't know. I don't recall.

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1 C. Newmark
 2 MR. KEIL: Can you please mark this
 3 as Defendants' Exhibit C.
 4 (Defendants' Exhibit C, E-mail
 5 correspondence, marked for
 6 identification, as of this date.)
 7 Q. You have just been handed what's
 8 been marked as Defendants' Exhibit C.
 9 Do you recognize this document?
 10 A. Vaguely.
 11 Q. Does this document reflect your
 12 most recent e-mail correspondence with Denise
 13 Galloway about your employment at Lawrence
 14 Hospital?
 15 A. It might. You know, I don't know.
 16 I don't keep my e-mails, so I don't know.
 17 Q. Why did you keep this one?
 18 A. Do you mind if I read it?
 19 Q. Of course. Go ahead.
 20 A. Thank you. I guess I kept it as
 21 proof that other people have gone to HR in
 22 regard to Cathy Magone.
 23 Q. When was the last time you looked
 24 at Defendants' Exhibit C before today?
 25 A. When was the last time?

15 (Pages 54 to 57)

Carole Newmark

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1 C. Newmark
 2 Q. Yes.
 3 A. Probably when I gave this over to
 4 Drita.
 5 Q. Did you review any documents prior
 6 to your testimony here today?
 7 A. Did I review them? Yes.
 8 Q. What documents did you review?
 9 A. Just some notes that Cathy Magone
 10 had written in regard to me.
 11 Q. Documents that you received in the
 12 course of this litigation?
 13 A. Yes.
 14 Q. Were there any other documents you
 15 reviewed?
 16 A. Just some of the e-mails. I don't
 17 recall looking at this one, though.
 18 Q. After this e-mail correspondence
 19 reflected in Defendants' Exhibit C, did you
 20 have a telephone conversation with Denise
 21 Galloway?
 22 MS. NICAJ: Objection.
 23 You can answer.
 24 A. Probably not. I don't recall. I
 25 don't recall. Our relationship at this point

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1 C. Newmark
 2 is we send Christmas cards and we
 3 occasionally see each other if she's in New
 4 York, and even then I don't really --
 5 Q. Drawing your attention to, in
 6 Ms. Galloway's response, approximately five
 7 lines up from the bottom you see the line,
 8 "If you'd rather chat, let me know a good
 9 time to call."
 10 A. Yes.
 11 Q. Did you follow up with Ms. Galloway
 12 to schedule time to talk?
 13 A. I don't recall. I may have. I
 14 don't recall.
 15 Q. You don't recall one way or the
 16 other?
 17 A. No. This was a very hard time for
 18 me after losing my job, so I don't remember.
 19 Q. And one line down from that towards
 20 the end, it says, "The theory of 'if she
 21 picks you, she will support you' sure was
 22 flawed."
 23 Do you know what Ms. Galloway was
 24 referring to by that line?
 25 A. No, I don't. Correction. I think,

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1 C. Newmark
 2 but I'm not sure, because I didn't write it.
 3 I think what she meant was she was not
 4 supported by Cathy Magone, but, however, she
 5 picked me and hired me, so she felt she will
 6 support me, and that's why she said, "sure
 7 was flawed."
 8 Q. Did you have a discussion with
 9 Denise Galloway prior to your own beginning
 10 employment where Ms. Galloway had expressed
 11 that theory to you?
 12 A. Yes.
 13 Q. Was that before you accepted
 14 employment?
 15 A. Yes.
 16 Q. What else did Ms. Galloway say to
 17 you during that conversation?
 18 A. That it would be a good opportunity
 19 for me. That it was more money. That it was
 20 closer to home, and she really played up the
 21 positives. That I know the work. That it is
 22 a different model. It's a case management
 23 model, but I do know hospital social work.
 24 That my relationship, and I quote
 25 her, "Your relationship with the physicians

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1 C. Newmark
 2 at Lawrence Hospital is sterling. They would
 3 be pleased to have you back, to work with
 4 you. You know, but the decision is yours."
 5 And she said, "I know you're not
 6 looking for work at this time. I know you're
 7 happy where you are, but give it some
 8 consideration."
 9 She also felt an obligation to Ed
 10 Dinan, who is the president, I believe he's
 11 the president, to leave him, as she said, in
 12 good hands. She felt a sense of loyalty to
 13 Lawrence, being an employee there for so many
 14 years, and she felt that -- I guess she felt
 15 if I took on this position, that she knew
 16 that things would just flow and that things
 17 would be okay.
 18 She also said, you know, getting
 19 along with the doctors and having a good
 20 rapport with them is key. And I've always
 21 known that.
 22 Q. Do you know Denise Galloway's
 23 mailing address?
 24 A. Yes, I do. I don't know it
 25 offhand, but I can certainly get that.

16 (Pages 58 to 61)

Carole Newmark

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1 C. Newmark
 2 Q. Do you know her telephone number?
 3 A. Not offhand.
 4 Q. But you have a record of it?
 5 A. Sure.
 6 Q. Who is Katherine Andersen?
 7 A. She is the nurse on the oncology
 8 unit. I believe she's a nurse educator.
 9 Q. Did you have any e-mail
 10 correspondence with Katherine Andersen?
 11 A. Yes, I did.
 12 Q. After your employment?
 13 A. Yes, I did.
 14 Q. How many times did you correspond
 15 with Ms. Anderson, if you recall?
 16 A. Maybe twice.
 17 MR. KEIL: Would you please mark
 18 this Defendants' Exhibit D.
 19 (Defendants' Exhibit D, E-mail
 20 correspondence, marked for
 21 identification, as of this date.)
 22 Q. Please take a look through
 23 Defendants' Exhibit D and let me know when
 24 you're finished.
 25 A. Okay.

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1 C. Newmark
 2 Q. Is Defendants' Exhibit D the e-mail
 3 correspondence with Katherine Andersen that
 4 you were referring to?
 5 A. Yes, it is.
 6 Q. In the middle of the page in the
 7 part that you drafted, the second line down
 8 contains the words, "I have to find my place,
 9 and that is in mental health."
 10 Do you remember writing that?
 11 A. Oh, yes.
 12 Q. What did you mean by that?
 13 A. Well, I meant that I came from a
 14 mental health -- I originally started at
 15 Lawrence Hospital in hospital social work and
 16 found my way into mental health, which was
 17 really what I love to do, and that since this
 18 didn't work out, I would go back to doing
 19 psychotherapy.
 20 Q. And the next line, you said, "I am
 21 looking to start up a private practice since
 22 my forte is psychotherapy."
 23 Do you remember writing that?
 24 A. Yeah, sure.
 25 Q. Did you know that your forte was

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1 C. Newmark
 2 psychotherapy before you started at Lawrence
 3 Hospital?
 4 A. Absolutely.
 5 Q. Did you anticipate your job at
 6 Lawrence Hospital involving psychotherapy?
 7 A. Absolutely.
 8 Q. Did it?
 9 A. Not to the degree that I was
 10 promised it would be.
 11 Q. How did it fall short of your
 12 expectations?
 13 A. When I was interviewed, Cathy
 14 Magone assured me that although I didn't have
 15 the case management model expertise at this
 16 point, I would be able to use my mental
 17 health experience and my behavioral health
 18 experience to a very large degree at Lawrence
 19 Hospital.
 20 And the reason that she said that
 21 was that I would be able to use it in the
 22 palliative care center and I would be able to
 23 use it working with patients and families who
 24 have issues, who have issues of death and
 25 dying, issues of finance, any human-related

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1 C. Newmark
 2 issues.
 3 And she assured me, and I quote
 4 her, that I will be able to use my behavioral
 5 health background and basically I could write
 6 my own ticket at Lawrence Hospital.
 7 Q. Those are her exact words?
 8 A. Those are her words.
 9 Q. How many interviews did you have
 10 with Cathy Magone?
 11 A. I remember one after 5 p.m., I
 12 believe it was, on December 1, 2005. Cathy
 13 Magone alluded to seeing me a second time,
 14 and I don't recall that, so...
 15 Q. You're referring to Cathy Magone's
 16 deposition testimony?
 17 A. Yes.
 18 Q. So you only remember one interview?
 19 A. I do.
 20 Q. Did you expect to be performing or
 21 providing psychotherapy at Lawrence Hospital
 22 full-time when you started?
 23 A. No.
 24 Q. What other types of care or what
 25 other types of work did you expect to be

17 (Pages 62 to 65)

Carole Newmark

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1 C. Newmark:

2 doing?

3 A. What I was told was I would be
4 working very closely with the case managers,
5 that they would, in fact, be feeding patients
6 to me that needed to be seen, and that there
7 would be other sources of providing me with
8 work via MDs, nurses, emergency room,
9 whatever was needed of me. But the major
10 portion of my job would be behavioral health.

11 Q. When you're using the phrase
12 behavioral health, you're referring to a type
13 of social work here that includes
14 psychotherapy?

15 A. Absolutely.

16 Q. And the work that you, for example,
17 referrals that you received from case
18 managers or other patients that were directed
19 to you by doctors or nurses, that was social
20 work of another kind?

21 A. No, no. It was cases that they
22 couldn't manage that needed that -- how do I
23 put this -- that needed a social worker's
24 touch, that needed some nurturing and caring
25 and being able to work with the patients and

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1 C. Newmark

2 In regard to that, I -- after a
3 month, two, three months, I don't recall, I
4 asked Cathy Magone if we could possibly have
5 a meeting with myself and Nicole, who were
6 the only two social workers, and the case
7 managers, so that we could clear the air, so
8 that they could understand that my
9 relationship with them was not adversarial
10 and that I wanted to work with them, but I
11 couldn't help them if they didn't give me the
12 information I needed in a timely manner and
13 allowed me to do my job.

14 And we had a meeting in regard to
15 this. At the meeting, some of them
16 understood what I meant. Some said, you
17 know, welcome. We understand. You know, but
18 we work at a very fast pace and social
19 workers work at a different pace because you
20 have to get in there and understand the
21 patient and understand the needs, but we will
22 try to work with you.

23 Working with me happened with some
24 of the case managers, but not with all. And
25 when I say back-biting, there was a lot of

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1 C. Newmark

2 their families in determining how they could
3 be discharged in a way that made sense to
4 Lawrence Hospital, as well as to the patient.
5 Keeping in mind the length of stay, keeping
6 in mind many other factors, which I
7 understood.

8 MR. KEIL: Let's take a five-minute
9 break.

10 (Recess taken from 11:24 a.m. to
11 11:30 a.m.)

12 Q. Drawing your attention back to
13 Defendants' Exhibit D, you see the line, "I
14 thought I could fit in at LHC but there's
15 such a back-biting mentality and pathology in
16 case management dept, so I didn't stand a
17 chance."

18 What did you mean by that sentence?

19 A. What I meant by that was that at
20 the onset, the case managers were very
21 territorial about their cases and about what
22 they did. And when I came on board, there
23 wasn't lot of sharing of information with me,
24 so I kind of worked in a vacuum for some
25 time, and I just felt like it wasn't working.

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1 C. Newmark

2 just e-mails back and forth to Cathy Magone,
3 particularly by Collette Gelardi, watching
4 everything that I did, calling me and saying,
5 "I need you here immediately."

6 And me saying, "I'm with a patient"
7 or, "I'm with a patient's family and the
8 patient is dying. I can't come there at this
9 moment," and her becoming very angry with me
10 and calling Cathy and saying that I'm not
11 responding to her. And I'm not responding
12 the way that they want me to respond.

13 That's what I meant by back-biting.
14 That instead of being cohesive, some of them,
15 not all, set up this relationship with me
16 that I felt was adversarial. And which also
17 impaired my ability to do what I needed to
18 do. Because if I have to help them
19 discharging, I need to know who's discharged
20 from day one, not when the person is getting
21 dressed to go home, and then they would call
22 me and say, "They're angry, they're going
23 home. They don't want to go home. Get in
24 there and make it right before they leave."

25 That's not working together and

18 (Pages 66 to 69)

Carole Newmark

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1 C. Newmark
 2 that's not working in a cohesive manner and
 3 that's what I meant by that.
 4 Q. Who besides Collette Gelardi
 5 behaved in that way?
 6 A. Kitty. I don't know Kitty's last
 7 name. I apologize.
 8 Q. Is Kitty her given name?
 9 A. That's the name she uses, Kitty.
 10 Kitty was extremely territorial and sometimes
 11 wouldn't share cases with me at all. And
 12 say, "I'm not even going to call. I'll do it
 13 myself. Don't worry. I'll handle this."
 14 So it was very hard for me to do
 15 the work that I needed to do.
 16 Q. How many case managers were there?
 17 A. I want to say seven to nine. I
 18 don't know exactly. Eight or nine.
 19 Q. Were there any besides Collette
 20 Gelardi and Kitty that you feel had this
 21 attitude?
 22 A. Barbara, in the beginning, and then
 23 she and I talked about working together, and
 24 when I left, at the time that I was
 25 terminated, we had a good working

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1 C. Newmark
 2 relationship, a very good working
 3 relationship, I would say.
 4 Q. When you and Barbara talked, was
 5 this at that meeting that you referred to or
 6 was it at some other time?
 7 A. It was before that.
 8 Q. When was the meeting that you and
 9 Nicole Serra had with the case managers?
 10 A. As I said before, I don't recall.
 11 Nicole came on board in April, I believe
 12 April, so it may have been May, sometime in
 13 May. It was one of our length-of-stay
 14 meetings, and we used that to discuss our
 15 roles and how we could work together.
 16 Q. Was Cathy Magone also present at
 17 the meeting?
 18 A. Yes, she was.
 19 Q. How long did you have the stay
 20 meetings while you were at Lawrence?
 21 A. Every week, once a week.
 22 Q. Did it have a regular schedule?
 23 A. Yes.
 24 Q. When was that?
 25 A. It was either 12 or 1 o'clock. I

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1 C. Newmark
 2 believe it was 1 o'clock. I believe we had
 3 lunch at 12 and then we met at the
 4 length-of-stay meeting afterwards.
 5 Q. What day of the week? Was there a
 6 regular day of the week?
 7 A. Yes, there was. I want to say
 8 Tuesday, but I'm not sure.
 9 Q. How old is Kitty?
 10 A. As I said before, probably her late
 11 50s. I don't really know. We didn't speak
 12 on a personal level.
 13 Q. How old is Collette?
 14 A. This is a guesstimate. Late 40s,
 15 50.
 16 Q. Who was the youngest case manager,
 17 as far as you know?
 18 A. Possibly someone by the name of
 19 Suzanne. And I don't know if she's still
 20 there. I don't know her last name. I don't
 21 recall her last name. Muccio, Suzanne
 22 Muccio, I believe.
 23 Q. How old is she?
 24 A. I would say late 30s, guesstimated.
 25 Q. Do you recall whether this meeting

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1 C. Newmark
 2 with all the case managers happened before or
 3 after Maura Del Bene started working at
 4 Lawrence Hospital?
 5 A. I want to say before.
 6 Q. In Defendants' Exhibit D, what did
 7 you mean by the word pathology in that same
 8 sentence I read to you earlier?
 9 A. Pathology is, how do I explain
 10 this, pathology is like the genesis of
 11 something. The pathology of it, where it
 12 stems from, how it progresses.
 13 Q. Were you using the word in a
 14 clinical sense?
 15 A. Yes.
 16 Q. Is there anything specific that you
 17 intended to refer to with that word other
 18 than the back-biting mentality?
 19 A. Just in general. Yeah, that's it.
 20 Q. Is it fair to say as of the time
 21 you wrote this e-mail you did not believe
 22 that you fit in with the case managers at
 23 Lawrence Hospital?
 24 A. No, I did fit in after a while.
 25 Q. So why did you say, "So I didn't

19 (Pages 70 to 73)

Carole Newmark

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1 C. Newmark
2 stand a chance?"
3 A. Obviously from being terminated, I
4 just didn't feel I stood a chance. I felt I
5 was kind of, you know, working against the
6 tide.
7 Q. Didn't stand a chance to do what?
8 A. To succeed.
9 Q. In the next sentence, you say, "I
10 did leave LHC with my head held high and will
11 continue to see the experience as one that
12 will catapult me into what I really should be
13 doing."
14 What were you referring to in this
15 sentence, what you really should be doing?
16 A. Going back into doing
17 psychotherapy, because Lawrence Hospital,
18 although they promised me the opportunity to
19 do that, did not avail that to me.
20 Q. Approximately what percentage of
21 your time did you spend doing psychotherapy
22 at Lawrence Hospital?
23 A. 30 percent. 30 to 40.
24 Q. Approximately what percentage of
25 your caseload involved psychotherapy at

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1 C. Newmark
2 Lawrence Hospital?
3 A. I think, given the nature of
4 patients and people who were in the hospital
5 and in an environment that's unusual for them
6 and that's very disorienting for them, every
7 one that I came in contact with, I could not
8 do psychotherapy per se with any one of them.
9 They were there for such a short period of
10 time.
11 If you talk about some really,
12 really brief therapy, I guess that's what's
13 done. Get to the point, get to the feelings
14 and have them move on.
15 Q. So when you say that your
16 expectation was that you would be doing more
17 psychotherapy at Lawrence Hospital than
18 turned out to be the case, you're referring
19 to the amount of time you would be able to
20 spend with each patient?
21 A. That, but not so much that, but the
22 promise of the palliative care center, which
23 was my reason for coming to Lawrence
24 Hospital.
25 Q. What was your salary with your

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1 C. Newmark
2 prior employer?
3 A. 50,000.
4 Q. And that was at --
5 A. Phelps Memorial.
6 Q. And your salary at Lawrence
7 Hospital was about 70,000?
8 A. 70.
9 Q. That didn't play a consideration
10 for you?
11 A. It was an enticement, but I've
12 learned over the years that money isn't
13 everything and that you have to wake up and
14 like yourself in the morning and do what you
15 need to do. And so it was nice. But it
16 wasn't the end-all and be-all.
17 Q. You've referred to several times
18 the palliative care center. Was there a
19 specific location in the hospital that was
20 designated for palliative care?
21 A. Not at that point. It was in the
22 works.
23 Q. Did you have an understanding of
24 where this specific location would be?
25 A. No.

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1 C. Newmark
2 Q. Did you hear about any plans for
3 construction or modification to the building
4 for this?
5 A. Just that it was in the works and
6 that they were going to hire a palliative
7 care nurse practitioner, and they did, in
8 Maura Del Bene, and that it would take off
9 from there. That the palliative care work
10 would begin, but that there would be a
11 designated unit, so to speak, or center for
12 palliative care.
13 Q. Now, in the last paragraph of your
14 e-mail in Defendants' Exhibit D, you referred
15 to or you used the phrase "you good guys" in
16 quotes?
17 A. Yes.
18 Q. Who is that?
19 A. Cathy and most of the people that I
20 worked with on the units, Kathy Anderson and
21 most of the people that I worked with on the
22 units. Some case management people, nurses,
23 doctors, technicians. It was a loss for me.
24 Q. Was there anyone you specifically
25 exclude from the phrase "good guys"?

20 (Pages 74 to 77)

Carole Newmark

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1 C. Newmark
 2 A. Anyone that I excluded?
 3 Q. Well, anyone you didn't intend to
 4 refer to by your using that phrase?
 5 A. No, I think if I wanted to say
 6 anything about someone, I would mention their
 7 names.
 8 Q. Had you included Nicole Serra to be
 9 among the good guys?
 10 A. Absolutely.
 11 Q. How about Maura Del Bene?
 12 A. Yes.
 13 Q. Your daughter's name is Janice
 14 Powers?
 15 A. That's correct.
 16 Q. Does she still work at Lawrence
 17 Hospital?
 18 A. No, she doesn't.
 19 Q. Do you know the circumstances under
 20 which she left Lawrence Hospital?
 21 A. Yes, I do. She moved to Danbury,
 22 Connecticut about the same time as I was
 23 terminated. She had given notice that she
 24 was leaving and that she would stay for a
 25 while but she might be leaving, and when they

1 C. Newmark
 2 A. Uh-huh.
 3 Q. Is it your understanding that her
 4 resignation from Lawrence Hospital was
 5 connected in any way with either of the Big
 6 Heart award nominations that you received?
 7 A. Absolutely not. She moved to
 8 Danbury, Connecticut. That was quite a trek
 9 for her to come back to Lawrence.
 10 Q. As of the date of your termination
 11 from Lawrence Hospital, were you working for
 12 anyone else?
 13 A. No.
 14 Q. Were you engaged in private
 15 practice?
 16 A. No.
 17 Q. Were you engaged in any form of
 18 consulting?
 19 A. To.
 20 Q. This was your only source of
 21 income?
 22 A. Correct.
 23 Q. When did you start looking for a
 24 job after your termination?
 25 A. About a week after.

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1 C. Newmark
 2 terminated me, she felt that she couldn't
 3 stay there. That was a decision that she
 4 made on her own and she resigned.
 5 Q. And you know this based on what she
 6 told you?
 7 A. I know this for a fact.
 8 Q. Is it because she told you or for
 9 some other reason?
 10 A. Because she told me.
 11 Q. Do you know if your daughter played
 12 a role in submitting one of the Big Heart
 13 awards on your behalf?
 14 A. Absolutely not. She has nothing to
 15 do with what's submitted to her. That's done
 16 on an individual basis by employees or
 17 patients and their families.
 18 Q. Do you know if her resignation was
 19 connected in any way with the response of the
 20 hospital to the second Big Heart award
 21 nomination?
 22 A. Can you repeat that?
 23 Q. You testified that Ms. Powers told
 24 you the reasons for her resignation from
 25 Lawrence Hospital.

1 C. Newmark
 2 Q. And what did you do to look for a
 3 job?
 4 A. I searched the internet. I went to
 5 unemployment and used them as a reference. I
 6 answered ads in the papers. I did some cold
 7 calls and sent my resume out.
 8 Q. Did you find a job?
 9 A. EventualY.
 10 Q. When?
 11 A. I found a job -- I started my
 12 present job on March 12, 2007.
 13 Q. Where are you currently employed?
 14 A. I'm working at Our Lady of Mercy
 15 outpatient mental health clinic.
 16 Q. And you've had that employment
 17 since March 12th?
 18 A. Yes.
 19 Q. Did you have any other jobs between
 20 your termination from Lawrence and your
 21 beginning work at Our Lady of Mercy?
 22 A. No.
 23 Q. What is your current salary at Our
 24 Lady of Mercy?
 25 A. 61 and change. I was hired at

21 (Pages 78 to 81)

Carole Newmark

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1 C. Newmark
 2 \$60,321. It's a union position.
 3 Q. Which union?
 4 A. 1199.
 5 Q. When did you receive a pay
 6 increase?
 7 A. After probation.
 8 Q. How long was your probationary
 9 period?
 10 A. Six months.
 11 Q. So on or about September 12th of
 12 '07?
 13 A. Correct.
 14 Q. Is your salary at Our Lady of Mercy
 15 determined by the union contracts?
 16 A. Yes.
 17 Q. Are you receiving any pay
 18 differentials connected with your experience
 19 or other factors relating to your employment?
 20 A. No, it goes according to how many
 21 years you have in the field.
 22 Q. So you are receiving a differential
 23 based on your own experience in the field?
 24 A. It's not a differential. It's a
 25 set amount of salary. For instance, if

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1 C. Newmark
 2 you're there -- if you're in the social work
 3 field for eight to nine years, you're at the
 4 top level. And so there is no -- it's
 5 different from people who are making less
 6 than me who have had less years in.
 7 Q. Are you earning at the top level?
 8 A. Yes, I am.
 9 Q. Do you receive any increase in pay
 10 based on any licensing or educational
 11 background that you have?
 12 A. No.
 13 Q. Do you have a copy of the
 14 collective bargaining agreement between Our
 15 Lady of Mercy and 1199?
 16 A. I do.
 17 Q. Is Our Lady of Mercy a member of
 18 the League of Voluntary Hospitals?
 19 A. I don't know. It's a Catholic
 20 hospital. It's actually in the midst of
 21 being taken over by Montefiore.
 22 Q. So you don't know?
 23 A. I'm not sure.
 24 Q. Did you discuss your efforts to
 25 find a job with anybody else between the time

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1 C. Newmark
 2 that you were terminated from Lawrence and
 3 when you started at Our Lady of Mercy, did
 4 you discuss your efforts to find a job with
 5 anybody else?
 6 A. With almost everyone I met. I'm a
 7 professional and I wanted to get right back
 8 to work. Even people who didn't want to hear
 9 me.
 10 Q. Did you suffer any health or
 11 medical problems as a result of your
 12 termination from employment at Lawrence?
 13 A. Yes, I did.
 14 Q. What were those?
 15 A. Depression, lack of self-esteem,
 16 self doubt, some gastrointestinal problems,
 17 which are exacerbated by stress.
 18 Q. Anything else?
 19 A. No, pretty healthy.
 20 Q. The gastrointestinal problems that
 21 you testified to existed prior to your
 22 termination?
 23 A. Yes. Correct.
 24 Q. Is this the same problem for which
 25 you requested a couple days off in September

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1 C. Newmark
 2 2006?
 3 A. That's correct.
 4 Q. For the record, what is that
 5 diagnosis?
 6 A. It's irritable bowel syndrome.
 7 Q. Did you seek any professional help
 8 or treatment in connection with your
 9 depression?
 10 A. I didn't seek formal professional
 11 help. I have a former supervisor who is in
 12 private practice, and I had talked to her
 13 just in e-mails and maybe once or twice on
 14 the telephone about what I was going through
 15 and what I was feeling.
 16 Q. Who is that?
 17 A. Eve First, F-I-R-S-T.
 18 Q. Over what period of time did you
 19 talk and correspond with Ms. First about your
 20 depression?
 21 A. Over the course of maybe two months
 22 after being terminated.
 23 Q. When did it start?
 24 A. Probably a few days after I was
 25 terminated.

22 (Pages 82 to 85)

Carole Newmark

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1 C. Newmark
 2 Q. And when did it stop?
 3 A. A month or two afterwards. Two
 4 months maybe afterwards.
 5 Q. And you referred to one or two
 6 times over the telephone?
 7 A. Basically by e-mail, I guess.
 8 Q. How often did you e-mail Ms. First
 9 about your depression?
 10 A. A couple of times.
 11 Q. In that one-month to two-month
 12 period?
 13 A. Yes.
 14 Q. Did Ms. First diagnose you with
 15 depression?
 16 A. No.
 17 Q. Is that your own assessment?
 18 A. The depression?
 19 Q. Yes.
 20 A. Yes. I also was diagnosed, I don't
 21 know if she wrote this down, but I went to my
 22 doctor, Dr. Page, and Dr. Page put me on
 23 Cymbalta for depression, which I fought, and
 24 then I took it and then I took myself off it.
 25 Q. What was the medication?

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1 C. Newmark
 2 A. Cymbalta.
 3 Q. Did Dr. Page diagnose your
 4 condition?
 5 A. She knew I was depressed.
 6 Q. So she prescribed it for
 7 depression?
 8 A. Yes. And I wasn't sleeping.
 9 Q. When did Dr. Page prescribe
 10 Cymbalta?
 11 A. I would say one or two months after
 12 my being terminated. I don't know for sure.
 13 Q. Was it before or after you stopped
 14 corresponding with Ms. First on the subject
 15 of your depression?
 16 A. It may have coincided.
 17 Q. So there may be some overlap time?
 18 A. There might be. I'm not sure.
 19 Q. How long did you take Cymbalta?
 20 A. Maybe two months.
 21 Q. And you took it because you were
 22 having trouble sleeping?
 23 A. I wasn't sleeping. I was
 24 depressed. I've never been terminated from a
 25 position before.

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1 C. Newmark
 2 Q. Were there any other symptoms that
 3 you understood this Cymbalta to be intended
 4 to treat?
 5 A. No, depression.
 6 Q. How did you pay for the medication?
 7 A. I had COBRA.
 8 Q. Was the medication effective?
 9 A. To a degree.
 10 Q. Why did you stop taking it?
 11 A. Because I decided that -- I'm not
 12 one to take medication. I don't like to take
 13 medication, and I decided I would process
 14 what had happened to me on my own, which is
 15 what I did.
 16 Q. Did you stop taking the medication
 17 in consultation with Dr. Page?
 18 A. Oh, yes. She had to wean me off
 19 it.
 20 Q. And she started weaning you off the
 21 medication during the one-to-two-month period
 22 you referred to?
 23 A. Probably after the two-month
 24 period, we started just taking it every other
 25 day, I believe. I'm not sure. I don't

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1 C. Newmark
 2 recall.
 3 Q. How long was the weaning off
 4 period?
 5 A. Maybe a month.
 6 Q. So in total you may have taken the
 7 Cymbalta for two to three months or over a
 8 two-to-three-month period?
 9 A. Approximately.
 10 Q. Did Dr. Page prescribe any other
 11 medication?
 12 A. For depression?
 13 Q. Yes.
 14 A. No.
 15 Q. Did Dr. Page prescribe you any
 16 other medication for any other reason?
 17 MS. NICAJ: You can answer.
 18 A. Yes.
 19 Q. For what symptoms?
 20 A. For high blood pressure.
 21 Q. Anything else?
 22 A. Restless leg syndrome.
 23 Q. Are your high blood pressure and
 24 restless leg syndrome conditions you had
 25 prior to your termination?

23 (Pages 86 to 89)

Carole Newmark

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1 C. Newmark
 2 A. Yes.
 3 Q. Did your symptoms related to those
 4 conditions change in any way after your
 5 termination?
 6 A. Yes, my blood pressure got higher
 7 and she had to work with my medication and I
 8 had to see her more frequently, maybe on a
 9 monthly basis. I now see her every three
 10 months for it and it's under control.
 11 Q. How long did it take to get your
 12 high blood pressure under control?
 13 A. Approximately three months maybe.
 14 Q. Approximately how long after your
 15 termination did your high blood pressure go
 16 up?
 17 A. It was immediate.
 18 Q. The same day?
 19 A. Probably.
 20 Q. Did Dr. Page change your medication
 21 for high blood pressure in order to treat
 22 this?
 23 A. I don't think so.
 24 Q. Either the type of medication or
 25 the dosage?

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1 C. Newmark
 2 A. No. The type is the same. And the
 3 dosage, I believe, is the same, or maybe she
 4 increased it. Perhaps she did increase it.
 5 Q. Do you know?
 6 A. I don't know for sure. I don't
 7 recall. It's been a while since I have been
 8 on this medication.
 9 Q. What medication is it?
 10 A. Cozaar, C-O-Z-A-A-R.
 11 Q. What did Dr. Page prescribe you for
 12 restless leg syndrome?
 13 A. Sinemet, S-I-N-E-M-E-T.
 14 Q. Did the symptoms associated with
 15 your restless leg syndrome change in any way
 16 after your termination?
 17 A. No.
 18 Q. Did you also see Eve First for your
 19 lack of self esteem and self doubt?
 20 A. I didn't see her. We corresponded.
 21 Yes, absolutely.
 22 Q. So all three topics, your
 23 depression, your lack of self esteem, your
 24 self doubt, were covered in those
 25 communications you described earlier?

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1 C. Newmark
 2 A. Yes.
 3 Q. What is Eve First's profession?
 4 A. She's a clinical social worker in
 5 private practice.
 6 Q. Aside from the medication
 7 prescribed by Dr. Page for your depression,
 8 did you receive any other prescriptions
 9 connected to your depression, your lack of
 10 self esteem or your self doubt following your
 11 termination?
 12 A. No.
 13 Q. Did you communicate with Eve First
 14 about your own mental health in the year
 15 preceding your termination from employment at
 16 Lawrence?
 17 A. No.
 18 Q. Had you ever corresponded or had
 19 contact with her before your termination with
 20 Lawrence in connection with your own mental
 21 health?
 22 A. No.
 23 Q. Why did you reach out to Eve First
 24 on this occasion?
 25 A. I reached out to her both as a

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1 C. Newmark
 2 colleague and a friend, just to say that I
 3 wasn't doing very well. That I was really
 4 affected by being terminated. This has never
 5 happened to me before, and I'm beginning to
 6 have self doubt, and she was very positive in
 7 her feedback to me about my capabilities and
 8 what she knew to be true about me as a social
 9 worker and as a therapist, and I guess I
 10 needed a pep rally, and she provided me with
 11 that. This was very informal. It was not
 12 anything formal.
 13 Q. Did you consider your
 14 correspondence and communications with Eve
 15 First to be therapeutic treatment?
 16 A. It was therapeutic. It wasn't
 17 therapy per se.
 18 Q. Aside from your communications with
 19 Eve First and the prescription you received
 20 from Dr. Page, did you seek mental health
 21 treatment or therapy from anybody else
 22 following your termination from Lawrence?
 23 A. No, I did not.
 24 Q. Who treated you for your
 25 gastrointestinal problems?

24 (Pages 90 to 93)

Carole Newmark

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1 C. Newmark
 2 A. Dr. Finegold.
 3 Q. How long had you been seeing Dr.
 4 Finegold for this diagnosis?
 5 A. I had been seeing Dr. Finegold
 6 since approximately 1998.
 7 Q. Did your gastrointestinal problems
 8 or your irritable bowel syndrome become worse
 9 after your termination from Lawrence
 10 Hospital?
 11 A. Yes.
 12 Q. When?
 13 A. Shortly after.
 14 Q. Was it the same day?
 15 A. No, I doubt if, it was the same
 16 day. Maybe the next week. It was
 17 short-lived.
 18 Q. How long did it last?
 19 A. Two or three days.
 20 Q. Did you seek medical treatment for
 21 it?
 22 A. I'm not sure.
 23 Q. Did you take any medication for it?
 24 A. No.
 25 Q. As a general matter, were you

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1 C. Newmark
 2 taking medication to treat your irritable
 3 bowel syndrome or other gastrointestinal
 4 problems in 2007?
 5 A. No.
 6 Q. Would it be fair to say as of the
 7 first month or two of 2007 you had recovered
 8 from the health, medical or mental health
 9 problems that you suffered as a result of
 10 your termination from Lawrence Hospital?
 11 MS. NICAJ: Objection.
 12 You can answer.
 13 A. Within the first few months of?
 14 Q. Yes.
 15 A. No. It lasted for awhile. It
 16 lasted -- I felt unsure of myself for awhile.
 17 I continued to do what I needed to do. I
 18 continued to look for work. It was the
 19 holiday season. People don't hire you during
 20 the holiday season, so it was very difficult,
 21 so I was feeling pretty badly about not
 22 working.
 23 Q. Did those feelings go away when you
 24 started working at Our Lady of Mercy?
 25 A. Absolutely.

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1 C. Newmark
 2 Q. Were you fully recovered as of
 3 March 12, 2007?
 4 MS. NICAJ: Objection.
 5 You can answer.
 6 Q. In your own opinion?
 7 A. Fully recovered from?
 8 Q. From depression, lack of
 9 self-esteem?
 10 A. Absolutely, yes.
 11 Q. Self doubt?
 12 A. Yes.
 13 Q. The exacerbation of your irritable
 14 bowel syndrome?
 15 A. Fine.
 16 Q. That's a yes?
 17 A. Yes.
 18 Q. Did you file for unemployment after
 19 your termination?
 20 A. Yes, I did.
 21 Q. To your knowledge, did Lawrence
 22 Hospital contest your request for
 23 unemployment?
 24 A. No, they didn't.
 25 Q. How much money did you receive in

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1 C. Newmark
 2 total in unemployment compensation?
 3 A. It was \$439 over a period of eight
 4 months or so. I don't have a -- I can get
 5 that for you. I don't have it off the top of
 6 my head.
 7 MS. NICAJ: Over eight months?
 8 Q. Are you sure it's not six months?
 9 A. Maybe six months, yeah. It's six
 10 months.
 11 Q. You said approximately \$439?
 12 A. \$439.
 13 Q. Per week over six months?
 14 A. Yes, and that was taxed.
 15 Correction. It was \$349. My
 16 dyslexia. No, I don't have dyslexia. It was
 17 349 after taxes.
 18 Q. Dr. Kerrienne Page was your
 19 personal physician?
 20 A. Correct.
 21 Q. How long had Dr. Page been your
 22 personal physician?
 23 A. Since 1998 as well.
 24 Q. So since your prior time at
 25 Lawrence Hospital?

25 (Pages 94 to 97)

Carole Newmark

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1 C. Newmark
 2 A. That's correct. We started on the
 3 same day.
 4 Q. Aside from the health, medical and
 5 mental health conditions that you already
 6 described, and your loss in salary as a
 7 result of your termination from Lawrence
 8 Hospital, did you suffer any other monetary
 9 or non-monetary injuries as a result of your
 10 termination?
 11 A. I suffered the ability to go to
 12 Lawrence Hospital, when I have an emergency
 13 or when I have a test to do. They've been my
 14 hospital since forever and that's been a
 15 great inconvenience for me.
 16 Q. Anything else?
 17 A. Not that I can think of at this
 18 time.
 19 Q. Why do you say that you lost the
 20 ability to go to Lawrence Hospital?
 21 A. Because I wouldn't go there. I'm
 22 in a legal situation with them and I just
 23 don't feel that it's -- it would behoove me
 24 to go there.
 25 Q. Has anyone at Lawrence Hospital

1 C. Newmark
 2 A. I did not.
 3 Q. Did you record the conversation?
 4 A. I recorded it verbally to Nicole
 5 Serra.
 6 Q. Meaning you told Nicole Serra?
 7 A. I told Nicole Serra.
 8 Q. When did you tell Nicole Serra?
 9 A. Nicole Serra was -- when I left
 10 Cathy Magone's office, Nicole Serra was
 11 summoned to her office so she could learn of
 12 being appointed to the palliative care unit.
 13 And so I kind of passed her in the hallway
 14 and I said, "I'll speak to you later."
 15 So when she finished meeting with
 16 Cathy Magone, that's when I told her, and of
 17 course she knew. She said, "I can't believe
 18 this. I just can't believe this has
 19 happened."
 20 I said, "Well, that's what
 21 happened."
 22 And she said, "This is why you came
 23 to Lawrence Hospital."
 24 Q. Those are Nicole Serra's exact
 25 words to you on that occasion?

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1 C. Newmark
 2 told you you would not be allowed to go
 3 there?
 4 A. No, this is my decision. What I
 5 sustained at Lawrence Hospital by being
 6 terminated was a real blow to my ego and I
 7 wouldn't want to see the same people there
 8 that knew I worked there and knew I was
 9 terminated. That's one of the reason why I
 10 wouldn't go there.
 11 Q. I want to take you back to that
 12 conversation with Cathy Magone in which she
 13 told you about her decision to appoint Nicole
 14 Serra rather than yourself for the palliative
 15 care team.
 16 Did you take any notes during that
 17 meeting?
 18 A. No, I didn't.
 19 Q. Did you take any notes afterwards?
 20 A. No, I didn't.
 21 Q. Did you make any written record of
 22 the discussion that you had with Cathy
 23 Magone?
 24 A. Not written.
 25 Q. Did you type it up in any way?

1 C. Newmark
 2 A. Yes.
 3 Q. "I can't believe this happened and
 4 that's why you came to Lawrence Hospital?"
 5 A. Yeah. She told me she felt very
 6 badly.
 7 Q. Did she say anything else to you on
 8 that occasion?
 9 A. We just talked about it. She said
 10 I remember when we both worked at Phelps and
 11 you went for your interview and you came back
 12 to me and said this is a great opportunity
 13 for me because I will be able to use my
 14 behavioral health skills and there is a
 15 wonderful palliative care unit that's up and
 16 coming.
 17 So the next day after my interview,
 18 I went back to work and spoke to Nicole and I
 19 told her about it and she was sad that I
 20 might be leaving, but she said I'm really
 21 happy for you.
 22 Q. Was there anything else that you
 23 said to Ms. Serra or that she said to you
 24 during that conversation?
 25 A. I don't recall. I mean, we had a

26 (Pages 98 to 101)

Carole Newmark

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1 C. Newmark
 2 lengthy conversation.
 3 Q. Approximately how long?
 4 A. During a lunch hour.
 5 Q. You were having lunch with her at
 6 the time?
 7 A. Yes, in the office.
 8 Q. Did you tell anyone other than
 9 Nicole Serra and Pat Orsaia about the
 10 conversation you had with Cathy Magone?
 11 A. Yes.
 12 Q. Who else?
 13 A. I told my daughter Janice Powers.
 14 Q. Anyone else?
 15 A. I told my partner.
 16 Q. What is your partner's name?
 17 A. Margaret Arnim.
 18 Q. When you say partner, you mean
 19 domestic partner?
 20 A. That's correct.
 21 Q. Was there anyone else?
 22 A. No, not immediately. I was
 23 disappointed by the decision. And I really
 24 didn't want to talk about it.
 25 Q. Was there anyone else that you told

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1 C. Newmark
 2 about your conversation with Cathy Magone
 3 prior to your termination from Lawrence
 4 Hospital?
 5 A. About?
 6 Q. About what Cathy Magone had said to
 7 you?
 8 A. About Nicole -- yes, I think the
 9 case managers knew what was, you know, what
 10 had happened.
 11 Q. Did you tell them yourself?
 12 A. I probably did, or maybe word got
 13 out through Nicole. I'm not sure. It wasn't
 14 something that I dwelled on.
 15 Q. What did you say to Janice Powers
 16 immediately or shortly after your
 17 conversation with Cathy Magone?
 18 A. I told her that I couldn't believe
 19 that the position was given to Nicole Serra.
 20 That it had been implied that the position
 21 would be mine. I told her I guess I was
 22 upset about it.
 23 Q. Did you say anything else to
 24 Ms. Powers about -- about that conversation?
 25 A. No, that was the crux of it.

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1 C. Newmark
 2 Q. Did you tell Ms. Powers the exact
 3 words that Cathy Magone had said to you?
 4 A. Yes.
 5 Q. Was there anything else that you
 6 told Ms. Powers in that conversation?
 7 A. That we were going shopping that
 8 evening.
 9 Q. How did you Ms. Powers respond?
 10 A. She was appalled.
 11 Q. What did she say?
 12 A. That she couldn't believe it.
 13 Q. Did she say anything else?
 14 A. No.
 15 Q. I'm sorry. What was the last name
 16 of your partner?
 17 A. Arnim, A-R-N-I-M.
 18 Q. Did you speak to Ms. Arnim the same
 19 day as your conversation with Cathy Magone?
 20 A. Yes.
 21 Q. What did you say to Ms. Arnim?
 22 A. Same thing I said to my daughter,
 23 that she had given it to Nicole Serra, the
 24 position to Nicole Serra, that she made a
 25 comment about her being younger than me and

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1 C. Newmark
 2 could handle the job better.
 3 Q. When you say the same thing, you're
 4 not saying it was the same word for word, it
 5 was the same in substance?
 6 A. In substance, and she said Nicole
 7 was younger and could handle the job better.
 8 Q. Did you make a point of repeating
 9 Cathy Magone's precise words to Ms. Arnim in
 10 this conversation?
 11 A. Yes.
 12 Q. You made a point of repeating Cathy
 13 Magone's precise words to Ms. Powers in your
 14 conversation to her?
 15 A. Yes.
 16 Q. These were two separate
 17 conversations?
 18 A. Yes.
 19 Q. Did they both happen the same day?
 20 A. Yes.
 21 Q. Did you tell Nicole Serra the
 22 precise words that Cathy Magone had used?
 23 A. Yes.
 24 Q. Why did you do you that?
 25 A. Why did I do that? I just did it.

27 (Pages 102 to 105)

Carole Newmark

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<p>1 C. Newmark</p> <p>2 Q. No particular reason?</p> <p>3 A. Because it felt like ageism to me.</p> <p>4 Q. You've testified that you believe</p> <p>5 that it had been implied that you would be</p> <p>6 assigned to the palliative care team during</p> <p>7 your interview with Cathy Magone; is that</p> <p>8 correct?</p> <p>9 A. Yes.</p> <p>10 Q. Cathy Magone never promised you</p> <p>11 that assignment, did she?</p> <p>12 A. There were no other social workers</p> <p>13 there. It was just me.</p> <p>14 Q. At the time of your interview?</p> <p>15 A. At the time of my interview. There</p> <p>16 was another social worker, but she was</p> <p>17 leaving, so the only person that would be</p> <p>18 there would be me, and she said this is a</p> <p>19 great opportunity for you because you know</p> <p>20 it's up and coming and I just want to give</p> <p>21 you some of the things that are down the pike</p> <p>22 here, so to speak.</p> <p>23 Q. As far as you know, Cathy Magone</p> <p>24 had the authority to appoint Ms. Serra to the</p> <p>25 palliative care team, correct?</p>	<p>1 C. Newmark</p> <p>2 from the time that I graduated and that I</p> <p>3 came back to Lawrence Hospital. I was very</p> <p>4 pleased to be there.</p> <p>5 Q. At the time that you started at</p> <p>6 Lawrence Hospital, did you have any plans or</p> <p>7 expectations about when you would be</p> <p>8 retiring?</p> <p>9 A. I figured around 70.</p> <p>10 Q. Have those plans changed since?</p> <p>11 A. No.</p> <p>12 Q. What is your date of birth?</p> <p>13 A. 9/16/45.</p> <p>14 Q. Do you believe that Nicole Serra</p> <p>15 was a poor choice for the palliative care</p> <p>16 team?</p> <p>17 MS. NICAJ: Objection.</p> <p>18 You can answer.</p> <p>19 A. I didn't think she was a poor</p> <p>20 choice. And my rationale for that was Nicole</p> <p>21 had no prior hospital social work experience</p> <p>22 when she came to Lawrence Hospital. And I</p> <p>23 had enough faith in Nicole knowing that she</p> <p>24 was a bright young lady, that she would be</p> <p>25 able to, you know, to do well under my</p>
Page 107	Page 109
<p>1 C. Newmark</p> <p>2 A. As far as I know.</p> <p>3 Q. And as you understand it, that was</p> <p>4 a matter within her discretion?</p> <p>5 A. Yes.</p> <p>6 Q. Do you believe that you are more</p> <p>7 deserving of the appointment than Ms. Serra</p> <p>8 was?</p> <p>9 A. Yes.</p> <p>10 Q. Why?</p> <p>11 A. Because of my experience. Because</p> <p>12 it was implied that that would be part of my</p> <p>13 job when the palliative care unit or center</p> <p>14 was up and running.</p> <p>15 Q. Any other reasons?</p> <p>16 A. It was one of the reasons I came to</p> <p>17 Lawrence Hospital.</p> <p>18 Q. What were the other reasons you</p> <p>19 came to Lawrence Hospital?</p> <p>20 A. Proximity to my home. Some</p> <p>21 advantage of making more money. Going back</p> <p>22 to a place that I had loved and worked very</p> <p>23 well in, and hoping to retire into.</p> <p>24 I had even mentioned to Cathy</p> <p>25 Magone that I had felt I had gone full circle</p>	<p>1 C. Newmark</p> <p>2 tutelage.</p> <p>3 This was an issue for Cathy Magone</p> <p>4 because she said she has no social work</p> <p>5 experience, and I said don't worry about it.</p> <p>6 She will learn. I'll, you know, mentor her.</p> <p>7 Q. I'm sorry, did you mean to say that</p> <p>8 Cathy Magone said Nicole Serra had no prior</p> <p>9 social work experience or hospital social</p> <p>10 work experience?</p> <p>11 A. Hospital social work experience,</p> <p>12 yes. I'm sorry. And unlike me, Nicole</p> <p>13 wanted to leave Phelps Memorial and she</p> <p>14 wanted to make more money. So it seemed, you</p> <p>15 know, when I said there was a position</p> <p>16 available, I spoke to, you know, Cathy Magone</p> <p>17 about Nicole, and, you know, and they made an</p> <p>18 interview or two, and it was a done deal.</p> <p>19 Q. Just to clarify, are those the</p> <p>20 reasons why you believe that Nicole Serra was</p> <p>21 not a poor choice to work at Lawrence</p> <p>22 Hospital or not a poor choice for selection</p> <p>23 to the palliative care team?</p> <p>24 MS. NICAJ: Objection.</p> <p>25 You can answer.</p>

Carole Newmark

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1 C. Newmark
2 A. I didn't think she was a poor
3 choice to work at Lawrence Hospital. And I
4 thought that I was a better choice for the
5 palliative care unit. I don't knock Nicole
6 Serra's ability to learn. But I think
7 working with dying people and working in an
8 area where death is imminent, I think it's
9 important to have some expertise and to have
10 -- to learn how to -- to know how to deal
11 with people during this very fragile time.
12 Nicole didn't have that experience.

13 Q. You and Ms. Serra had worked
14 together at Phelps Memorial Hospital?

15 A. Right.

16 Q. For what period of time?

17 A. I worked at Phelps for about two
18 years. And she actually was my supervisor.

19 Q. What was your title at Phelps?

20 A. Clinical social worker
21 psychotherapist.

22 Q. And what was Ms. Serra's title?

23 A. Supervisor. I'm not sure what her
24 exact title was.

25 Q. Was there anything that you did at

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1 C. Newmark
2 while you were at Lawrence Hospital in 2006
3 that you felt showed that you were a better
4 choice than Nicole Serra for the palliative
5 care team?

6 A. Yes. I worked on the oncology unit
7 again in 2007 -- 2006, and so it was a
8 continuation of what I had been doing prior
9 at Lawrence Hospital.

10 Q. Did Nicole Serra do any work at the
11 oncology unit at Lawrence Hospital?

12 A. No, she wasn't assigned to that. I
13 made the assignment. I assigned her to other
14 units.

15 Q. What units did you assign Ms. Serra
16 to?

17 A. Med-surg, medical surgical unit,
18 labor and delivery, peds.

19 Q. Meaning pediatrics?

20 A. Pediatrics. That was it, because
21 she was new and I didn't assign her to those
22 units until at least two months into her
23 being there. She shadowed me on the units
24 that I was on and that was every unit there
25 is in the hospital.

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1 C. Newmark
2 Lawrence Hospital that you believe shows that
3 you would have been a better choice than
4 Nicole Serra for appointment to the
5 palliative care team?

6 A. Is there anything I did?

7 Q. That's correct.

8 A. What I did prior to this
9 employment, this last employment at Lawrence
10 Hospital, was I worked on the oncology unit.
11 I was assigned to it. That's the relevance
12 of my feeling that I could do a better job or
13 that I was capable of doing the palliative
14 care piece because I worked with dying
15 patients and their families. That was my
16 prior assignment when I worked there in '97,
17 '98. That was one of my assignments.

18 Q. So when you were referring to the
19 oncology unit, you're referring to the
20 oncology unit at Lawrence Hospital in '97 and
21 '98?

22 A. That's correct. That would hold
23 over to my last employment at Lawrence
24 Hospital.

25 Q. Was there anything that you did

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1 C. Newmark
2 Q. Over what period of time did Nicole
3 Serra shadow you?

4 A. Over a period of -- intensely
5 without seeing any of her own patients for
6 about two months.

7 Q. Was it after that two-month period
8 that you assigned her to medical surgical,
9 labor and delivery and pediatrics?

10 A. Yes.

11 Q. To your knowledge, has Lawrence
12 Hospital completed a physical site for
13 palliative care on its premises?

14 A. I don't know.

15 Q. In the next few questions that I
16 will be asking you, I'm going to be focusing
17 the attention on some slightly different
18 topics. One of the topics will be your
19 understanding of the process -- the
20 decision-making process that Cathy Magone
21 used to reach her decision to appoint Nicole
22 Serra rather than yourself to the palliative
23 care team.

24 Another focus for some questions
25 will be the merits of the decision that she

29 (Pages 110 to 113)